

# Monitoring Standards for Special Education



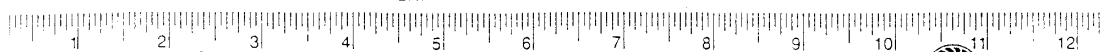
*Office of Special Education and  
Early Intervention Services*

April, 2003

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MICHIGAN DEPARTMENT OF EDUCATION DECISION MAKING RULER - 2001



**Michigan Department of Education  
Office of Special Education and Early Intervention Services**

The Michigan Department of Education, Office of Special Education and Early Intervention Services (OSE/EIS) has the responsibility of developing policy related to compliance special education monitoring and implementing that policy through on-site monitoring reviews in local and intermediate school districts, public school academies, and public agencies. The Michigan Special Education Monitoring Standards (Standards) are based on the Individual With Disabilities Education Act (IDEA) Regulations and the Michigan Administrative Rules for Special Education (Rules). The Standards have been revised to align with the revisions to the Rules and Standards have been added for children transitioning from the Part C system (*Early On*®) to the Part B system (Special Education).

The OSE/EIS would like to thank those who assisted in the review and revision of the Standards.

**Part B Monitoring Standards**

- |                          |  |
|--------------------------|--|
| • Kathy Barker           | Contracted State Monitoring Coordinator                |
| • Kathy Bartolameolli    | Dickinson-Iron ISD                                     |
| • Asa Brown              | Contracted State Monitor/Compliance Data Analyst       |
| • Christine Clinton-Cali | Contracted State Monitor                               |
| • Rose Crandell          | Contracted State Monitor                               |
| • Steve Hearst           | Wayne County RESA                                      |
| • Maureen Hockstra       | Contracted State Monitor                               |
| • Laurie Jefsen          | Kalamazoo RESA   |
| • Patricia Keller        | CAUSE/State PAC  |
| • Harriet Kirk           | Detroit Public Schools                                 |
| • Sheri Krishnan         | SEAC/CIMP Steering Committee                           |
| • Gene Kyle              | Contracted State Monitor                               |
| • James D. Line          | Contracted State Monitor                               |
| • Gray Mark              | Gratiot-Isabella RESD                                  |
| • Mark McWilliams        | Michigan Protection & Advocacy/CIMP Steering Committee |
| • Jeff Miller            | Contracted State Monitor                               |
| • Pamela Mish            | Washtenaw ISD/SEAC/CIMP Steering Committee             |
| • Mark Moody             | Midland County ESA                                     |
| • Michael O'Leary        | Contracted State Monitor                               |
| • Judy Pazol             | Contracted State Monitor                               |
| • Darryl Petterson       | Contracted State Monitor                               |
| • Hugh Reid              | MDE, OSE/EIS, Monitoring Coordinator                   |
| • Janet Sheetz           | Contracted State Monitor                               |
| • Larry Simpson          | Flint Community Schools/CIMP Steering Committee        |
| • Beth Steenwyk          | Kalamazoo Eastern Service Area/CIMP Steering Committee |
| • Donna Tinberg          | Novi Community Schools                                 |
| • Laurie VanderPloeg     | Kent ISD/SEAC/CIMP Steering Committee                  |
| • Mary Vratnina          | COP ISD  |
| • T. Gail White          | Contracted State Monitor                               |
| • Ken Zimmerman          | Contracted State Monitor                               |

**Part C/Part B Transition Standards**

- |                    |   |
|--------------------|---|
| • Linda Getz       | Michigan Protection & Advocacy            |
| • Lucy Hough-Wait  | Kent County ISD                           |
| • Greg LaMore      | Ottawa ISD                                |
| • Perry Lopuchi    | Muskegon Area ISD                         |
| • Tamara Nelson    | SICC                                      |
| • Michelle Quarton | Oakland Schools                           |
| • Hugh Reid        | MDE, OSE/EIS, Monitoring Coordinator      |
| • Janet Richards   | Huron ISD                                 |
| • Vanessa Winborne | MDE, OSE/EIS, Acting Early-On Coordinator |

**OFFICE OF SPECIAL EDUCATION AND EARLY INTERVENTION SERVICES**  
**Monitoring Standards for Special Education**

<b>Std. No.</b>	<b>Std. Type</b>	<b>Rule No.</b>	<b>Standard</b>	<b>Documentation and Verification Criteria</b>
Review Type File 011 R 340.1705(1)(a)	CI		CI Eligibility - Evidence of development at a rate at or below two (2) standard deviations below the mean.	Verify that the MET report contains a score on an intellectual assessment. Verify that it is at or below approximately two (2) standard deviations below the mean.
Review Type File 012 R 340.1705(1)(b)	CI		CI Eligibility - Evidence that standardized test scores in reading and math were approximately in the lowest six (6) percentiles.	Verify that the MET report contains standardized test scores in reading and math approximately in the lowest six (6) percentiles.  <u>Additional Information:</u> This requirement will not apply if the student is not of an age, grade or mental age/developmental level appropriate for formal or standardized achievement tests.
Review Type File 013 R 340.1705(1)(c)	CI		CI Eligibility - Evidence of lack of development primarily in the cognitive domain.	Verify that the MET report states that the lack of development is primarily in the cognitive domain.
Review Type File 014 R 340.1705(1)(d)	CI		CI Eligibility - Evidence of an impairment of adaptive behavior.	Verify that the MET report documents a delay in adaptive behavior.  <u>Additional Information:</u> The MET report includes an adaptive behavior checklist, rating scale or a written observation report indicating that the student's adaptive behavior is delayed.
Review Type FILE 014a R 340.1705(1)(e)	CI		CI Eligibility - Evidence that there is an adverse affect on the student's educational performance.	Verify that there is an adverse affect on the student's educational performance.  <u>Additional Information:</u> Examples for determining an adverse affect on the student's educational performance may include but are not limited to: <ul style="list-style-type: none"> <li>- Classroom performance assessments,</li> <li>- Class test scores,</li> <li>- Report card grades, or</li> <li>- Performance on statewide and/or district-wide assessments which may be included in the supporting documentation of the MET/evaluation review processes.</li> </ul>
Review Type File 015 R 340.1705(2)	CI		CI Eligibility - Evidence that the MET included a psychologist.	Verify that a school psychologist or fully licensed psychologist participated in the MET process by checking the MET report for written input.  <u>Additional Information:</u> Check the MET report for the name and title of that person.
Review Type File 017 R 340.1706(1)	EI		EI Eligibility - Evidence of behavioral problems primarily in the affective domain.	Verify that the MET report states that behavioral problems are primarily in the affective domain.
Review Type File 018 R 340.1706(1)	EI		EI Eligibility - Evidence that behavioral problems were manifested over an extended period of time.	Verify that the MET report states that the behavioral problems were manifested over an extended period of time.

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Review Type File 019 R 340.1706(1)	EI		EI Eligibility - Evidence that behavioral problems adversely affected the student's educational performance to the extent that the student cannot profit from regular learning experiences without special education support.	<p>Verify that the MET report states that the specific problems the student has demonstrated in school (or in his or her environment) are such that he or she cannot profit from learning experiences in a general education program without special education support.</p> <p><u>Additional Information:</u>            Examples for determining an adverse effect on the student's educational performance may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>- Classroom performance assessments,</li> <li>- Class test scores,</li> <li>- Report card grades, or</li> <li>- Performance on statewide and/or district-wide assessments which may be included in the supporting documentation of the MET/evaluation review processes.</li> </ul>
Review Type File 020 R 340.1706(1)(a)-(d)	EI		EI Eligibility - Evidence that problems result in behaviors manifested in one or more of the following: inability to build and maintain satisfactory relationships within school environment; inappropriate behaviors/feelings, or depression under normal circumstances; general pervasive mood of unhappiness; or physical symptoms or fears.	<p>Verify that the MET report states that the student exhibits one or more of the following behavior patterns:</p> <ul style="list-style-type: none"> <li>- inability to build and maintain satisfactory relationships;</li> <li>- inappropriate behaviors/feelings or depression under normal circumstances;</li> <li>- general pervasive mood of unhappiness; or</li> <li>- physical symptoms or fears.</li> </ul> <p><u>Additional Information:</u></p> <ul style="list-style-type: none"> <li>- Students with maladaptive behaviors related to schizophrenia or similar disorders are included. [R 340.1706(2)]</li> <li>- Does not include students with social maladjustments unless it is determined that there is an emotional impairment. [R 340.1706(2)]</li> </ul>
Review Type File 021 R 340.1706(3)	EI		EI Eligibility - Evidence that intellectual, sensory, or health factors are not the primary cause of the student's impairment.	<p>Verify that the MET report states that intellectual, sensory, or health factors are not the primary cause of the student's impairment.</p>
Review Type File 021a R 340.1706(4)(a)	EI		EI Eligibility - Evidence of a student's performance in the educational setting and in other settings, such as adaptive behavior within the broader community.	<p>Check the MET report to verify that it contains evidence of the student's performance in the educational setting and in other settings, such as adaptive behavior within the broader community, when determining eligibility for the emotional impairment.</p> <p><u>Additional Information:</u>            The standard is "Not applicable" when redetermining the disability as an emotional impairment.</p>
Review Type File 021b R 340.1706(4)(b)	EI		EI Eligibility - Evidence of systematic observation of the behaviors of primary concern that interfere with educational and social needs.	<p>Verify that the MET report contains evidence of systematic observation of the behaviors of primary concern that interfere with educational and social needs.</p>

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Review Type File 021c	EI		EI Eligibility - Evidence of intervention strategies and length of time these strategies were used.	Verify that there is evidence of intervention strategies and length of time these strategies were used.
R 340.1706(4)(c)				
Review Type File 021d	EI		EI Eligibility - Evidence of relevant medical information, if any.	Verify that MET report contains evidence of relevant medical information, if any, when determining eligibility for emotional impairment.
R 340.1706(4)(d)				
<u>Additional Information:</u> A "blank" is unacceptable. When there is no relevant medical information, the report must indicate "None." A checklist is acceptable when checked.				
Review Type File 022	EI		EI Eligibility - Evidence that the MET included a psychologist or a psychiatrist.	Verify that a psychologist or psychiatrist participated in the MET process by providing a signed report.
R 340.1706(5)(a)				
<u>Additional Information:</u> Check the MET report for a signed comprehensive evaluation.				
Review Type File 023	EI		EI Eligibility - Evidence that the MET included a school social worker (SSW).	Verify that a school social worker participated in the MET process by providing a signed report.
R 340.1706(5)(b)				
<u>Additional Information:</u> Check the MET report for a signed comprehensive evaluation.				
Review Type File 025	HI		HI Eligibility - Evidence of any type or degree of hearing loss that interferes with development or adversely affects educational performance in a general education setting.	Verify that the MET report contains evidence of a hearing loss that interferes with development or adversely affects educational performance in the general education setting.
R 340.1707(1)				
<u>Additional Information:</u> Examples for determining an adverse affect on the student's educational performance may include, but are not limited to: - Classroom performance assessments, - Class test scores, - Report card grades, or - Performance on statewide and/or district-wide assessments which may be included in the supporting documentation of the MET/evaluation review processes.				
Review Type File 026	HI		HI Eligibility - Evidence that the MET included an audiologist.	Verify that an audiologist participated in the MET process by submitting a signed report.
R 340.1707(2)				
<u>Additional Information:</u> Check the MET report for a signed comprehensive evaluation.				
Review Type File 027	HI		HI Eligibility - Evidence that the MET included an otolaryngologist or otologist.	Verify that an otolaryngologist or otologist participated in the MET process by submitting a signed written report.
R 340.1707(2)				
<u>Additional Information:</u> Check the MET report for a signed comprehensive evaluation.				

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Review Type File 030 R 340.1708(1)(a)	VI		VI Eligibility - Evidence that the visual impairment interferes with development or adversely affects educational performance.	<p>Verify that the MET report states that the visual impairment interferes with development or adversely affects educational performance.</p> <p><u>Additional Information:</u>            Examples for determining an adverse effect on the student's educational performance may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>- Classroom performance assessments,</li> <li>- Class test scores,</li> <li>- Report card grades, or</li> <li>- Performance on statewide and/or district-wide assessments which may be included in the supporting documentation of the MET/evaluation review processes.</li> </ul>
Review Type File 031 R 340.1708(1)(b)(i-iii)	VI		VI Eligibility - Evidence to verify central vision acuity of 20/70 or less in the better eye after refractive correction, a peripheral field of vision restricted to twenty (20) degrees or less, or a progressively deteriorating eye condition.	<p>Verify that the MET report states that one or more of the three (3) following conditions exists:</p> <ul style="list-style-type: none"> <li>- a central vision acuity of 20/70 or less in the better eye after refractive correction; or</li> <li>- a peripheral field of vision restricted to twenty (20) degrees or less; or</li> <li>- a progressively deteriorating eye condition</li> </ul> <p><u>Additional Information:</u>            The higher the denominator the greater the visual problem. The student with 20/80 has less vision than a student with 20/70 and, therefore, meets one requirement for eligibility. The lower the degree of visual field, the more severe the visual loss.</p> <p>If a student cannot be tested accurately for acuity, then functional visual assessments conducted by a teacher certified in visual impairment may be used in addition to the medical evaluation for determination of impairment.</p>
Review Type File 032 R 340.1708(2)	VI		VI Eligibility - Evidence that the MET included an ophthalmologist or optometrist.	<p>Verify that an ophthalmologist or optometrist participated in the MET process by submitting a signed written report.</p> <p><u>Additional Information:</u>            Check the MET report for a signed comprehensive evaluation.</p>
Review Type File 033a R 340.1708(4)	VI		O&M Evaluation - Evidence of evaluation by an orientation and mobility (O&M) specialist for visually impaired (VI) students with 20/200 or less acuity, after routine refractive correction, or who have a peripheral field of vision to not more than twenty (20) degrees.	<p>Verify, that for a student with 20/200 or less acuity or a peripheral field restricted to not more than twenty (20) degrees, an orientation and mobility evaluation was written.</p> <p><u>Additional Information:</u>            This standard for the determination of visual impairment is not required as part of the MET .</p>
Review Type File 033b R 340.1708(4)	VI		O&M Evaluation - Evidence that the O&M report contains a set of recommended procedures.	<p>Verify that the orientation and mobility (O&amp;M) report contains a set of recommended procedures.</p> <p><u>Additional Information:</u>            If O&amp;M services are to be added, they must be added by an IEP Team and recorded on an IEP Team report. However, a teacher of the VI may provide O&amp;M training activities.</p>

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Review Type File 035	PI	34 CFR §300.7(c)(8) R 340.1709(1)	PI Eligibility - Evidence that a severe orthopedic impairment adversely affects educational performance.	<p>Verify that the MET report states that a severe orthopedic impairment adversely affects educational performance.</p> <p><u>Additional Information:</u>            Examples for determining an adverse effect on the student's educational performance may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>- Classroom performance assessments,</li> <li>- Class test scores,</li> <li>- Report card grades, or</li> <li>- Performance on statewide and/or district-wide assessments which may be included in the supporting documentation of the MET/evaluation review processes.</li> </ul> <p>The term "severe orthopedic impairment" includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some member) impairments caused by disease (e.g., polio myelitis, bone tuberculosis), and impairments from other causes (e.g. cerebral palsy, amputation, and fractures or burns that cause contractures).</p>
Review Type File 036	PI	R 340.1709(2)(a-e)	PI Eligibility - Evidence that the MET included assessment data from one of the following, an orthopedic surgeon, internist, neurologist, pediatrician, a family physician or any other approved physician as defined by 1978 PA 368 MCL 333.1101 et. seq.	<p>Verify that an orthopedic surgeon, internist, neurologist, pediatrician, a family physician, or any other approved physician participated in the MET providing a signed report.</p> <p><u>Additional Information:</u>            Check the MET report for a signed comprehensive evaluation.</p> <p>A person credentialed as "M.D." or "D.O." is an approved physician. Reference 1978 PA 368 MCL 333.1101 et seq. for an approved physician.</p>
Review Type FILE 038b	OHI	R 340.1709a(1)(a)	<p>OHI Eligibility - Evidence of limited strength, vitality, or alertness including a heightened alertness to environmental stimuli that results in limited alertness with respect to the educational environment due to chronic or acute health problems such as one of the following:</p> <ul style="list-style-type: none"> <li>- Asthma</li> <li>- Attention deficit hyperactivity disorder</li> <li>- Diabetes</li> <li>- Epilepsy</li> <li>- A heart condition</li> <li>- Hemophilia</li> <li>- Lead poisoning</li> <li>- Leukemia</li> <li>- Nephritis</li> <li>- Rheumatic fever</li> <li>- Sickle cell anemia</li> </ul>	<p>Verify that there is a condition of limited strength, vitality, or alertness; including a heightened alertness to environmental stimuli that results in limited alertness with respect to the educational environment due to chronic or acute health problems such as one of the following:</p> <ul style="list-style-type: none"> <li>- Asthma</li> <li>- Attention deficit hyperactivity disorder</li> <li>- Diabetes</li> <li>- Epilepsy</li> <li>- A heart condition</li> <li>- Hemophilia</li> <li>- Lead poisoning</li> <li>- Leukemia</li> <li>- Nephritis</li> <li>- Rheumatic fever</li> <li>- Sickle cell anemia</li> </ul>

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Review Type File 038c R 340.1709a(1)(b)	OHI		OHI Eligibility - Evidence that the impairment adversely affects a student's educational performance.	<p>Verify that the met report states that the other health impairment adversely affects educational performance.</p> <p><u>Additional Information:</u>            Examples for determining an adverse affect on the student's educational performance may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>- Classroom performance assessments,</li> <li>- Class test scores,</li> <li>- Report card grades, or</li> <li>- Performance on statewide and/or district-wide assessments which may be included in the supporting documentation of the MET/evaluation review processes.</li> </ul>
Review Type File 038d R 340.1709a(2)	OHI		<p>OHI Eligibility - Evidence that the MET included one of the following:</p> <ul style="list-style-type: none"> <li>- An orthopedic surgeon</li> <li>- An internist</li> <li>- A neurologist</li> <li>- A pediatrician</li> <li>- A family physician</li> <li>- Or other approved physician as defined in 1978 PA 368 MCL 333.1101 et seq.</li> </ul>	<p>Verify that one of the following:</p> <ul style="list-style-type: none"> <li>- An orthopedic surgeon,</li> <li>- An internist,</li> <li>- A neurologist,</li> <li>- A pediatrician,</li> <li>- A family physician, or</li> <li>- Other approved physician as defined in 1978 PA 368 MCL 333.1101 et seq. participated in the MET by providing a signed report.</li> </ul> <p><u>Additional Information:</u>            Check the MET report for a signed comprehensive evaluation.</p>
Review Type File 039 R 340.1710(1)	SLI		SLI Eligibility - Evidence of a speech and language impairment that adversely affects educational performance.	<p>Verify that the MET report states that there is an impairment of language, articulation, voice and/or fluency in the speech pattern that adversely affects educational performance.</p> <p><u>Additional Information:</u>            Examples for determining an adverse affect on the student's educational performance may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>- Classroom performance assessments,</li> <li>- Class test scores,</li> <li>- Report card grades, or</li> <li>- Performance on statewide and/or district-wide assessments which may be included in the supporting documentation of the MET/evaluation review processes.</li> </ul>



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Review Type File 039a R 340.1710 (2)	SLI		SLI Eligibility - Evidence of a communication disorder determined by one (1) or more of the following speech and language impairments: - Language - Articulation - Fluency - Voice	<p>Verify that a communication disorder is determined by one (1) or more of the following speech and language impairments:</p> <ul style="list-style-type: none"> <li>- Language</li> <li>- Articulation</li> <li>- Fluency</li> <li>- Voice</li> </ul> <p><u>Additional Information:</u>  Look for documentation that:</p> <ul style="list-style-type: none"> <li>- A language impairment exists which interferes with the student's language effectiveness and which includes one (1) or more of the following: <ol style="list-style-type: none"> <li>1) Phonology</li> <li>2) Morphology</li> <li>3) Syntax</li> <li>4) Semantics</li> <li>5) Pragmatics [R 340.1710(2)(a)]</li> </ol> </li> <li>- An impairment of articulation exists, including omissions, substitutions, or distortions of sound that persist beyond the age it may be expected to be corrected by maturation alone. [R 340.1710(2)(b)]</li> </ul> <p>An impairment in fluency exists that interferes with effective communication, including an abnormal rate of speaking, speech interruptions, and repetition of sounds, words, phrases or sentences that interfere with effective communication.  [R 340.1710(2)(c)]</p> <p>An impairment in voice impairment is indicated by inappropriate pitch, loudness, and/or voice quality.  [R 340.1710(2)(d)]</p>
Review Type File 040a R 340.1710 (3) (a)	SLI		SLI Eligibility - Evidence of a language impairment must be indicated by a spontaneous language sample demonstrating inadequate language functioning.	<p>Verify that the MET report includes evidence of a language impairment indicated by a spontaneous language sample demonstrating inadequate language functioning, in determining speech and language eligibility.</p> <p><u>Additional Information:</u>  This standard is "Not applicable" for a speech impairment only. Look for a language impairment in one or more of the following areas: phonological, morphological, syntactic, semantics, or pragmatics. For a language impairment, look for evidence of a spontaneous language sample that documents inadequate language function.  [R 340.1710(2)(a)(i-iv)]</p>
Review Type File 041 R 340.1710(3)(b)	SLI		SLI Eligibility - Evidence of results of not less than two (2) standardized assessment instruments or two (2) sub-tests designed to determine language functioning which indicate inappropriate language functioning for the student's age.	<p>When determining eligibility for language impairment, verify that the MET report contains not less than two (2) standardized tests, or two (2) sub-tests designed to determine language functioning which are based on the child's age.</p> <p>Look for the name of the tests used and the results. The tests must indicate inappropriate language functioning including phonological, morphological, syntactic, semantic, and pragmatics.</p>

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Review Type File 042 R 340.1710(5)	SLI		SLI Eligibility - Evidence that the MET included a teacher of students with speech and language impairments under R 340.1796, or a speech and language pathologist qualified under R 340.1792.	Verify that a teacher of students with speech and language impairments under R 340.1796, or a speech and language pathologist qualified under R 340.1792 participated in the MET process.  <u>Additional Information:</u> Check the MET report for the name and title of that person.
Review Type File 044 R 340.1711(1)	ECDD		ECDD Eligibility - Evidence of the student's birth date to verify eligibility (less than eight (8) years of age).	Verify by checking the student's date of birth and that the student is less than eight (8) years of age.  <u>Additional Information:</u> If less than eight (8) years of age the student is eligible for early childhood developmental delay.
Review Type File 045 R 340.1711(1)	ECDD		ECDD Eligibility - Evidence exists to verify that a single impairment cannot be differentiated through existing criteria for other impairment areas.	Verify that the MET report states that a primary impairment exists that cannot be differentiated through existing criteria for other impairments.
Review Type File 046 R 340.1711(1)	ECDD		ECDD Eligibility - Evidence of an impairment in one or more areas of development equal to or greater than one-half (1/2) of the expected development for chronological age.	Verify that the MET report states that the developmental rate is one-half (1/2) or less than the expected development for the chronological age.  <u>Additional Information:</u> Look for documentation of a developmental assessment. The results of scores must be in developmental level terms.  A variety of assessments may be used including, but not limited to, the Michigan Literacy Progress Profile [MLPP] and curriculum based measurements.
Review Type File 050 R 340.1713(2)(a-g)	SLD		SLD Eligibility - Evidence of a severe discrepancy between intellectual ability and achievement was found in one or more of the following: oral expression, listening comprehension, written expression, basic reading skill, reading comprehension, mathematics calculation, mathematics reasoning.	Verify that the MET report states that a severe discrepancy between intellectual ability and achievement exists in one (1) or more of the following areas: <ul style="list-style-type: none"> <li>- oral expression,</li> <li>- listening comprehension,</li> <li>- written expression,</li> <li>- basic reading skill,</li> <li>- reading comprehension,</li> <li>- mathematics calculation, or</li> <li>- mathematics reasoning.</li> </ul> <u>Additional Information:</u> Poor handwriting in and of itself is not a qualification for eligibility.
Review Type File 051 R 340.1713(2)	SLD		SLD Eligibility - Evidence that the child does not achieve commensurate with age and ability when the child has been provided with learning experiences appropriate for age and ability.	Verify that the MET report states that the student does not achieve commensurate with age and ability when appropriate age and ability learning experiences have been provided.  <u>Additional Information:</u> Look for documentation of previous age-appropriate learning experiences.

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Review Type File 052 R 340.1713(3)(a-d)	SLD		SLD Eligibility - Evidence found that the severe discrepancy is not primarily the result of one or more of the following disabilities: visual, motor, hearing, cognitive impairment, emotional impairment, or autism.	Verify that the MET report states that the severe discrepancy is not primarily the result of one or more of the following disabilities: <ul style="list-style-type: none"> <li>- visual,</li> <li>- motor,</li> <li>- hearing,</li> <li>- cognitive impairment,</li> <li>- emotional impairment, or</li> <li>- autism.</li> </ul>
Review Type File 053 R 340.1713(5)(g) R 340.1713(3)(e)	SLD		SLD Eligibility - Evidence that the severe discrepancy is not primarily the result of environmental, cultural, or economic differences.	Verify that the MET report states that eligibility was not based solely on behaviors relating to environmental, cultural, or economic differences.
Review Type File 054 R 340.1713(7)(a)	SLD		SLD Eligibility - Evidence that the MET included a general education teacher.	Verify that a general education teacher participated in the MET process.  <u>Additional Information:</u> Check the MET report for the name and title of that person.  For a child of less than school age, an individual qualified by the state educational agency to teach a child of his or her age must participate.
Review Type File 055 R 340.1713(7)(b)	SLD		SLD Eligibility - Evidence that one person qualified to conduct individual diagnostic examinations of the student was included as a MET member.	Verify that a person qualified to conduct individual diagnostic examinations participated in the MET process.  <u>Additional Information:</u> Check the MET report for the name and title of that person. The qualified person may include a school psychologist, an authorized provider of speech and language under R 340.1745(d), or a teacher consultant.
Review Type File 055a R 340.1713(5)(c)-(d)	SLD		SLD Eligibility - Evidence of a MET report which contains the relevant behavior noted during the observation and the relationship of that behavior to that student's academic functioning.	Check the MET report to verify that it contains the relevant behavior noted during the observation and the relationship of that behavior to the student's academic functioning.  <u>Additional Information:</u> The initial MET report must contain documentation of the behaviors noted. The observation must be done in a setting relevant to the areas of the suspected learning disability. If behavior is not observed, this report may include input from the teacher or observation of work samples as appropriate.

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Review Type File 055b	SLD	R 340.1713(4)(a)	SLD Eligibility - Evidence of a general education classroom observation by a team member other than the general education teacher.	<p>Check the MET report to verify that it contains evidence of a general education classroom observation by a member of the MET other than the general education teacher, and that person was a member of the IEP Team.</p> <p><u>Additional Information:</u>  The initial eligibility IEP Team report must contain the name and title of the person who made the observation. The observation setting must be in a general classroom.</p> <p>For a child less than school age or out of school, the observation of the child shall be in an environment appropriate for a child of that age.</p> <p>This standard is "Not applicable" for a three-year redetermination, if not requested by the evaluation review process.</p>
Review Type File 055c	SLD	R 340.1713(5)(a)-(b)	SLD Eligibility - Evidence of a MET report which contains a recommendation of eligibility by the MET and the basis for making this recommendation.	<p>Check the MET report to verify that it contains a recommendation of eligibility by the MET and the basis for making the recommendation.</p>
Review Type File 055d	SLD	R 340.1713(5)(e)	SLD Eligibility - Evidence of a MET report which contains educationally relevant medical findings, if any.	<p>Check the MET report to verify that it contains educationally relevant medical findings, if any, when determining eligibility for learning disabilities.</p> <p><u>Additional Information:</u>  A "blank" is unacceptable. When there are no educationally relevant medical findings, the report must indicate "None." A checklist is acceptable when checked.</p>
Review Type File 055e	SLD	R 340.1713(5)(f)	SLD Eligibility - Evidence that the severe discrepancy was not correctable without special education and related services.	<p>Check the MET report to verify that it states that a severe discrepancy was not correctable without special education and related services when determining eligibility for learning disabilities.</p>
Review Type File 055f	SLD	R 340.1713(5)(b)	SLD Eligibility - Evidence that the IEP Team members signed either in agreement or disagreement with the conclusions reached by the team.	<p>Check the IEP Team report to verify that each IEP Team member signed in agreement or that a dissenting report was attached, if not in agreement with the conclusions reached by the team.</p> <p><u>Additional Information:</u>  If the IEP Team report does not reflect the conclusion of an IEP Team member, a separate report must be submitted that reflects the conclusions of the dissenting member. Check the records for a dissenting report for each dissenting member.</p> <p>Typed names of the participants on the IEP report is not acceptable.</p>

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Review Type File 056	SXI	R 340.1714(1)(a)(i-iv)	SXI Eligibility - Evidence of cognitive development at a rate of two (2) to three (3) standard deviations below the mean and two (2) or more of the following conditions: hearing, vision, physical, or health impairments.	<p>Verify that the MET report states that there is a cognitive development at a rate of two (2) to three (3) standard deviations below the mean and two (2) or more of the following conditions:</p> <ul style="list-style-type: none"> <li>- hearing,</li> <li>- vision,</li> <li>- physical, or</li> <li>- health impairments.</li> </ul> <p><u>Additional Information</u>  Refer to rule language for specific severity of sensory, health, and physical impairments.</p> <p>This standard is “Not applicable” when standard #057 is applicable.</p>
Review Type File 057	SXI	R 340.1714(1)(b)(i-iv)	SXI Eligibility - Evidence of cognitive development at a rate of three (3) or more standard deviations below the mean or students for whom evaluation instruments do not provide a valid measure of cognitive ability and one or more of the following conditions: hearing, vision, physical, or health impairments.	<p>Verify that the MET report states that there is a cognitive development at a rate of three (3) or more standard deviations below the mean or students for whom evaluation instruments do not provide a valid measure of cognitive ability and one or more of the following conditions:</p> <ul style="list-style-type: none"> <li>- hearing,</li> <li>- vision,</li> <li>- physical, or</li> <li>- health impairments.</li> </ul> <p><u>Additional Information:</u>  Refer to rule language for specific severity of sensory, health, and physical impairments. For cognitive measure, a statement that “evaluation instruments do not provide a valid measure of cognitive ability” is acceptable.</p> <p>This standard is “Not applicable” when standard #056 applies.</p>
Review Type File 058	SXI	R 340.1714(2)	SXI Eligibility - Evidence that the MET evaluation included a psychologist and, depending upon the physical disabilities, the MET participants required in either R 340.1707 (HI), R 340.1708 (VI), R 340.1709 (PI), R 340.1709a (OHI), or R 340.1716 (TBI)	<p>Verify that a psychologist and other required members participated in the MET process.</p> <p>Depending upon the physical disabilities, other required MET participants are required in the following rules:</p> <ul style="list-style-type: none"> <li>- R 340.1707 (HI)</li> <li>- R 340.1708 (VI),</li> <li>- R 340.1709 (PI)</li> <li>- R 340.1709a (OHI)</li> <li>- R 340.1716 (TBI)</li> </ul> <p>Also verify that there was/were appropriate physician(s) for the MET depending upon the disabilities in the physical domain. Check the MET report for a signed report.</p> <p><u>Additional Information:</u>  Check the MET report for a signed comprehensive evaluation.</p>

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Review Type File 061 R 340.1715(1)	AI		Autism - Evidence of disturbances in the rates and sequences of cognitive, affective, psychomotor, language, and speech development.	Verify that the MET report states the existence of disturbances in the rates and sequences of cognitive, affective, psychomotor, language, and speech development.
Review Type File 062 R 340.1715(2)(a)	AI		Autism - Evidence of disturbance in the capacity to relate appropriately to people, events, and objects.	Verify that the MET report states that there is a disturbance in the capacity to relate appropriately to people, events, and objects.
Review Type File 063 R 340.1715(2)(b)	AI		Autism - Evidence of the absence, disorder, or delay of language, speech, or meaningful communication.	Verify that the MET report states that there is an absence, disorder, or delay of language, speech, or meaningful communication.
Review Type File 064 R 340.1715(2)(c)(i-viii)	AI		Autism - Evidence of unusual or inconsistent response to sensory stimuli in one (1) or more of the following: sight, hearing, touch, pain, balance, smell, taste, or the way the student holds his/her body.	Verify that the MET report states that there is unusual or inconsistent response to sensory stimuli in one (1) or more of the following: - sight, - hearing, - touch, - pain, - balance, - smell, - taste, or - the way the student holds his/her body.
Review Type File 065 R 340.1715(2)(d)	AI		Autism - Evidence that the student demonstrates insistence on sameness as shown by stereotyped play patterns, repetitive movements, abnormal preoccupation, or resistance to change.	Verify that the MET report states that there is an insistence on sameness as shown by stereotyped play patterns, repetitive movements, abnormal preoccupation, or resistance to change.
Review Type File 066 R 340.1715(3)	AI		Autism - Evidence of the absence of schizophrenia.	Verify that the MET report states that there is an absence of schizophrenia.  <u>Additional Information:</u> Evidence of schizophrenia includes delusions, hallucinations, loosening of associations, and incoherence.
Review Type File 067 R 340.1715(4)	AI		Autism - Evidence that the MET included a psychologist or a psychiatrist.	Verify that a psychologist or a psychiatrist participated in the MET process by providing a signed report.  <u>Additional Information:</u> Check the MET report for a signed comprehensive evaluation report.
Review Type File 068 R 340.1715(4)	AI		Autism - Evidence that the MET included an authorized provider of speech and language services under R 340.1745(d).	Verify that an authorized provider of speech and language services under R 340.1745 (d) participated in the MET process by providing a signed report.  <u>Additional Information:</u> Check the MET report for a signed comprehensive evaluation.

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Review Type File 069 R 340.1715(4)	AI		Autism - Evidence that the MET included a SSW.	<p>Verify that a school social worker participated in the MET process by checking the MET for a signed report.</p> <p><u>Additional Information:</u> Check the MET report for a signed comprehensive evaluation.</p>
Review Type File 070b R 340.1716(1) R 340.1716(2)	TBI		<p>TBI Eligibility - Evidence of an acquired injury to the brain caused by an external physical force that results in total or partial functional disability or psychosocial impairment or both, in one (1) or more of the following areas:</p> <p>A) Cognition B) Language C) Memory D) Attention E) Reasoning F) Behavior G) Physical functions H) Informational processing I) Speech</p>	<p>Verify that the MET report confirms that there is a closed head injury resulting in impairment in one (1) or more of the following areas:</p> <p>A) Cognition B) Language C) Memory D) Attention E) Reasoning F) Behavior G) Physical functions H) Informational processing I) Speech</p> <p><u>Additional Information:</u> The term “traumatic brain injury” does not apply to brain injuries that are congenital or degenerative or to brain injuries induced by birth trauma.</p>
Review Type File 070c R 340.1716(1)	TBI		TBI Eligibility - Evidence that there is an adverse affect on the student’s educational performance.	<p>Verify that the MET report contains evidence that there is an adverse affect on the student’s educational performance.</p> <p><u>Additional Information:</u> Examples for determining an adverse affect on the student’s educational performance may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>- Classroom performance assessments,</li> <li>- Class test scores,</li> <li>- Report card grades, or</li> <li>- Performance on statewide and/or district-wide assessments which may be included in the supporting documentation of the MET/evaluation review processes.</li> </ul>
Review Type File 070d R 340.1716(3)	TBI		TBI Eligibility - Evidence that there was a comprehensive evaluation by a multidisciplinary evaluation team that included an assessment from a family physician or other approved physician as defined in 1978 PA 368 MCL 333.1101 et seq.	<p>Verify that there was a comprehensive evaluation by a multidisciplinary evaluation team that included an assessment from a family physician or other approved physician as defined in 1978 PA 368 MCL 333.1101 et seq.</p> <p>Check the MET report for a signed comprehensive evaluation.</p>
Review Type File 071 R 340.1721(1)	Consent		Parent Consent - Evidence that the time line from the receipt of a special education referral to the request for written consent for evaluation was within ten (10) calendar days.	<p>Verify that the referral and consent document(s) indicate that the time line from the receipt of a special education referral to the request for written consent for evaluation was within ten (10) calendar days.</p> <p><u>Additional Information:</u> Check the date of referral and the date consent was requested. This standard may be marked “Not applicable” if the student was referred more than three years prior to monitoring, or if the student transferred in to the district as a special education student.</p>

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Review Type File 072 R 340.1721(1)	Consent		Parent Consent - Evidence that parental consent to evaluate was obtained.	<p>Verify the parent signature on the consent to evaluate form.</p> <p><u>Additional Information:</u>  Mark "Not applicable" if the student was initially referred to special education more than three (3) years prior to monitoring, or if the student transferred into the district as a special education student.</p>
Review Type File 073 R 340.1721(1)	REF		Parent Notice - Evidence that the agency notified the parent pursuant to rule.	<p>Verify that the agency notified the parent.</p> <p><u>Additional Information:</u>  Check the parent notice form, the referral form, or the consent form to check that the agency provided a copy of the procedural safeguards, and the parent handbook or other document with the notification requirements pursuant to the rule.</p> <p>Mark this standard "Not applicable" if the referral is more than three (3) years old.</p>
Review Type File 074 R 340.1721a(1) R 340.1721a(2)	MET		Evaluation Procedure - Evidence of MET evaluation.	<p>Verify that there was a MET evaluation by checking the MET report.</p> <p><u>Additional Information:</u>  The MET report must document the names and titles of at least two (2) MET members. Find documentation of input by each mandated member of the MET and any other participants. The diagnostic reports must be dated within one (1) year of the MET report.</p>
Review Type File 075 34 CFR §300.343(b)(ii) R 340.1721a(2)(b)	MET		Evaluation Procedure - Evidence of a MET recommendation of eligibility.	<p>Verify by checking the MET report that there was a team recommendation of eligibility.</p>
Review Type File 076 R 340.1721a(2)(b)	MET		Evaluation Procedure - Evidence of a written MET report.	<p>Check the MET report to verify that it is a written report.</p> <p><u>Additional Information:</u>  Diagnostic reports dated within one (1) year must be used by the MET. This standard is "Not applicable" for a transfer student during the thirty (30) day temporary placement period.</p>
Review Type File 077 R 340.1721a(2)(b)	MET		Evaluation Procedure - Evidence of the documentation on the MET or other evaluation reports specifying the student's current level of educational performance and educational needs of the student.	<p>Check the MET report to verify that it includes the present level of educational performance and educational needs of the student, or that they are stated in other evaluation reports as part of the MET report.</p> <p><u>Additional Information:</u>  There should be sufficient information concerning the child's current functioning in the student's area(s) of need arising from the student's disability so that approaches for ensuring involvement and progress in the general curriculum and any needed adaptations or modifications to that curriculum can be identified.  (34 CFR appendix A to part 300, question #1, Page 12471)</p> <p>This standard is "Not applicable" for a transfer student during the thirty (30) day temporary placement period.</p>



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Review Type FILE 077a 34 CFR §300.534(b)(1)	MET		Eligibility - Evidence that the determinant factor for eligibility is not lack of instruction in reading or math or limited English proficiency.	Verify that the MET report states that eligibility is not primarily due to a lack of instruction in reading or math or limited English proficiency.
Review Type File 078 R 340.1721a(2)(b)	MET		Evaluation Procedure - Evidence of written evaluation reports, verify input from a variety of sources, including the opportunity for parent input to the MET.	<p>Verify that the MET report includes written evaluation reports with input from a variety of sources, including parent input.</p> <p><u>Additional Information:</u> At a minimum, the name of the person who contacted the parent and the date is required.</p> <p>This standard is “Not applicable” for a transfer student during the thirty (30) day temporary placement period.</p>
Review Type File 079 R 340.1721a(2)(b)	MET		Evaluation Procedure - Evidence that a minimum of two (2) procedures were utilized for determining an appropriate educational program for the student.	<p>Verify that the MET report contains at least two (2) procedures for determining an appropriate educational program for the student.</p> <p><u>Additional Information:</u> This standard is “Not applicable” for the transfer student during the thirty (30) day temporary placement period.</p>
Review Type File 092 34 CFR §300.500(b)(1)(i) 34 CFR §300.19 34 CFR §300.561(a)(1)	Referral		Student’s Native Language - Evidence that the parent(s) had been informed of the relevant activity for which consent is sought in the native language or mode of communication.	<p>Verify that the parent(s) had been informed of the relevant activity for which consent is sought in the native language or mode of communication.</p> <p><u>Additional Information:</u> Check referral, consent to evaluate, or other form for documentation.</p>
Review Type Administrative Interview 094 R 340.1721a(3)	ADM. INT		Evaluation Procedure - Evidence of prereferral consultation being provided within department guidelines.	<p>Verify that prereferral consultation was provided within Michigan Department of Education guidelines, by interviewing service providers.</p> <p><u>Additional Information:</u> Review for consistency with “Procedures for Prereferral Consultation,” May, 1987. List any specific concerns.</p>
Review Type File 095 R 340.1721b(1)	IEP		IEP Team Meeting - Evidence that the superintendent appointed IEP Team participants and invited the parent(s).	<p>Verify that the superintendent or designee appointed the IEP Team participants, and invited the parents to the IEP Team meeting.</p> <p><u>Additional Information:</u> Check the IEP Team report and/or the invitation to the parent(s).</p> <p>If the parent(s) attended the IEP Team meeting, this item is in compliance.</p>

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Review Type File 096	IEP	34 CFR §300.344(a)(4)	IEP Team Meeting - Evidence that a representative of the public agency was present at the IEP Team meeting.	<p>Verify that a representative of the public agency was in attendance at the meeting and signed the report as a participant.</p> <p><u>Additional Information:</u>  This person must:</p> <ul style="list-style-type: none"> <li>- Be qualified to provide or supervise the provision of special education,</li> <li>- Be knowledgeable about the availability of resources of the district,</li> <li>- Be knowledgeable about the general curriculum, and</li> <li>- Have the authority to commit district resources necessary to implement the IEP.</li> </ul> <p>See 34 CFR Appendix A to Part 300, Question #22, Page 12477.</p> <p>The representative may include, but is not limited to, the following: principal, assistant principal, director of special education, supervisors and coordinators of special education, special education teachers, teacher consultants, school psychologists, and/or SSWs.</p> <p>Required participants at the IEP Team meeting may fill multiple roles. However the teacher of the child cannot serve as the representative of the public agency unless another teacher of the child is present.</p>
Review Type File 097	IEP	34 CFR §300.344(a)(2)(3)	IEP Team Meeting - Evidence that the student's teacher was a member of the recent IEP Team. If the student is enrolled in general education, the student's general education teacher participated.	<p>Verify by checking the IEP Team report that at least one general education teacher of the student signed the IEP Team report as a participant in the IEP Team meeting, if the student is, or may be participating, in the general education environment.</p> <p><u>Additional Information:</u>  At least one special education teacher of the student (or provider when there is no special education teacher) must also be present at the IEP Team meeting. Check for signatures on the IEP Team report.</p> <p>The teacher of the child may be:</p> <ul style="list-style-type: none"> <li>- The teacher appropriate for the student's age and ability if not enrolled (may be a special education teacher or general education teacher, such as an early childhood special education teacher or a 'ZA' endorsed teacher for preschool)</li> <li>- A general education teacher if the student is in general education.</li> <li>- A special education teacher or service provider if the student is in special education.</li> </ul> <p>See 34 CFR Appendix A to Part 300, Question #1, Page 12471; and Question #24, Page 12477.</p>
Review Type File 098	IEP	R 340.1721a(2)(b) 34 CFR §300.343(b)(ii)	IEP Team Meeting - Evidence that a MET member was in attendance if the meeting was the initial IEP Team meeting or an IEP Team meeting where a disability is redetermined.	<p>Check the IEP Team report and the MET report to verify that at least one (1) person who signed the IEP Team report was a member of the MET if the IEP Team meeting was the initial meeting, or an IEP Team meeting where a change in disability is determined.</p>

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Review Type				
098a	IEP	34 CFR §300.344(a)(5)	IEP Team Meeting - Evidence that an individual who can interpret the instructional implications of the evaluation results was in attendance at the IEP Team meeting.	<p>Verify that an individual who can interpret the instructional implications of the evaluation results attended the IEP Team meeting.</p> <p><u>Additional Information:</u>  Check for signature on the IEP Team report for one of the following:</p> <ul style="list-style-type: none"> <li>- Special education teacher,</li> <li>- Related service provider, or</li> <li>- Other service provider who is responsible for implementing the IEP.</li> </ul>
Review Type				
098b	IEP	R 340.1713(4)	IEP Team Meeting - SLD Eligibility if the purpose of the IEP is to consider an initial MET recommendation regarding eligibility for specific learning disability (SLD) per R 340.1713, the IEP Team must have at least one member, other than the student's general education teacher, who has documented an observation of the student in the general education classroom setting or in an environment appropriate for a child less than school age.	<p>Verify that the person completing the observation was in attendance if the purpose of the IEP is to consider a MET recommendation regarding eligibility for SLD per R 340.1713. The IEP Team must have at least one member other than the student's general education teacher who has documented an observation of the student in the general education classroom setting or in an environment appropriate for a child less than school age.</p> <p><u>Additional Information:</u>  Check for a signature on the IEP Team report.</p> <p>This standard is "Not applicable" for a three-year redetermination IEP Team meeting.</p>
Review Type				
File				
099	IEP	R 340.1721c(1)	IEP Team Meeting - Evidence that the district of residence was responsible for conducting the initial IEP Team meeting.	<p>Verify that the administrative representative of the resident district was present at the initial IEP Team meeting.</p> <p><u>Additional Information:</u>  The standard is "Not applicable" if the student's initial IEP Team meeting occurred more than three years prior to monitoring.</p> <p>Check for a signature on the IEP Team report.</p>
Review Type				
File				
100	IEP	R 340.1721c(1) 34 CFR §300.345(a)(1) 34 CFR §300.345(d)	IEP Team Meeting - Evidence that the IEP Team meeting was scheduled at a mutually agreed-upon time and place.	<p>Verify that the parent(s) were given the opportunity to participate in scheduling the IEP Team meeting at a mutually agreed-upon time and place.</p> <p><u>Additional Information:</u>  Review the IEP Team report or school logs to document that parents were contacted to determine a mutually agreeable time and place of the IEP Team meeting. Look for dates and results of parent contacts.</p> <p>If the parent(s) did not attend the IEP Team meeting, check the agency's records (including the name of the person making the contact and the date and results of the contact), to determine that more than one parent contact was made using such means as follows: telephone calls, correspondence, or visits to home or place of employment. [34 CFR §300.345(c)-(d)]</p> <p>The standard is considered 'In compliance' if the parent(s) attended.</p>

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Review Type File 101	REF/CON/ IEP	R 340.1721c(2)	Referral - Evidence that the time from referral or receipt of parental consent to evaluation to the IEP Team meeting was within thirty (30) school days.	<p>Verify that the IEP Team meeting was held within thirty (30) school days from the date of the receipt of consent by the public agency requesting the parental consent for evaluation.</p> <p><u>Additional Information:</u> Look for the date of receipt of the parental consent and the date of the initial IEP Team meeting.</p> <p>This standard is “Not applicable” for a transfer student or the initial referral of a student that occurred more than three (3) years prior to the special education monitoring.</p> <p>An extension of time for an initial IEP Team meeting, must be in writing, with an agreement by the parent and public agency.</p>
Review Type File 103	IEP	34 CFR §300.345(b)(1) 34 CFR §300.345(c)	IEP Team Meeting - Evidence that the parent was informed of the purpose, time, and location of the IEP Team meeting and who will be in attendance.	<p>Verify that the parent was informed of the purpose, time, and location of the IEP Team meeting and who will be in attendance.</p> <p><u>Additional Information:</u> Check the statement on the IEP Team report, letter of invitation, or other documentation.</p>
Review Type File 105	IEP	34 CFR §300.345(E) 34 CFR §300.19 34 CFR §300.561(a)(1)	IEP Team Meeting - Evidence the agency attempted to ensure the parent understood the proceedings of the IEP Team meeting.	<p>Verify the agency’s attempt to ensure that the parent understood the proceedings of the IEP Team meeting.</p> <p><u>Additional Information:</u> Check the referral, consent form, MET, IEP Team report, or other record for documentation.</p> <p>Look for documentation that the native language is noted. If the native language of the parent is other than English, or for parents with deafness, find documentation of the action taken to ensure the parent understood the proceeding of the IEP Team meeting, such as arranging for an interpreter.</p>

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Review Type Program/Service 106	IEP	34 CFR §300.341(a)(1) 34 CFR §300.350(a)(1)(2)	<p>Programs/Services - Evidence that the student with a disability is receiving special education programs and services, pursuant to the IEP Team report including the following:</p> <p>A) Schedule of program/services,  B) Instruction consistent with annual goals/short-term objectives (STOs),  C) Supplementary aids and services/program accommodations and modifications/special factors,  D) Participation in state and district-wide assessments,  E) Transition services for students, if specified.</p>	<p>Verify that instruction is authorized and consistent with the annual goals and STOs, and that the extent of time in special education program(s) and or service(s) are provided as authorized in the IEP Team report.</p> <p><u>Additional Information:</u>  A) Compare the specifications of the current IEP Team report (program/services, type, frequency, goals, and STOs) to the student's (daily, weekly, monthly) special education program and/or service schedule.</p> <p>Verify that the student is receiving all and only the special education programs and/or services authorized in the IEP Team report.</p> <p>B) Determine that instruction is consistent with the annual goals and STOs authorized by the IEP Team. Check sources of documentation which may include teacher lesson plans, logs or records of service providers, student work assignments, and student portfolios.</p> <p>C) Verify that the student is receiving all the supplementary aids/services/program modifications and accommodations (and identified special factors) specified by the IEP Team report.</p> <p>D) Verify that participation in state and district-wide assessments, was implemented as specified by the IEP Team report. Check sources for documentation such as provider schedules, logs, provider interview, and student work.</p> <p>E) Verify that secondary transition services were implemented as specified by the IEP Team report.</p>
Review Type File 107	IEP	34 CFR §300.343(b)(ii)	IEP Team Meeting - Evidence that eligibility for special education was determined at the initial IEP Team meeting.	<p>Check the MET report to verify a recommendation of eligibility, and the IEP Team report to verify a determination of eligibility for special education at the initial IEP Team meeting.</p> <p><u>Additional Information:</u>  The IEP Team may determine an impairment different from that recommended by the MET only when all required diagnostic information is available.</p>
Review Type File 108	IEP	R 340.1702	IEP Team Meeting - Evidence that the student is not more than twenty-five (25) years of age as of September 1, has not completed a normal course of study, and has not graduated from high school.	<p>Verify by checking the IEP Team report or other school records that:</p> <ul style="list-style-type: none"> <li>- the student is not more than twenty-five (25) years of age as of September 1,</li> <li>- has not completed a normal course of study, and</li> <li>- has not graduated from high school.</li> </ul> <p><u>Additional Information:</u>  It is necessary for the monitor to review the educational records to document status.</p>
Review Type File 109	IEP	R 340.1721d	IEP Team Meeting - Evidence the IEP Team submitted its report to the superintendent.	<p>Verify that the IEP Team report was submitted to the superintendent/designee.</p> <p><u>Additional Information:</u>  Check for the signature of the superintendent/designee on the IEP Team report/notice.</p>

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Review Type File and Program/Service 110	IEP	34 CFR §300.343(c)(1)	IEP - Evidence of a written IEP Team report.	<p>Verify that the IEP Team report is a current report by checking that the date is not more than one (1) year old.</p> <p><u>Additional Information:</u>  Verify by checking the month, day, and year of the IEP Team meeting.</p>
Review Type File and Program/Service 111	IEP	34 CFR §300.346(a)(1)(ii)	IEP - Evidence that the results of the student's initial evaluation or most recent evaluation were considered by the IEP Team.	<p>Verify that the IEP Team report documented the consideration of the student's initial evaluation or most recent evaluation.</p> <p>The most recent evaluation must be considered at each review.</p>
Review Type File and Program/Service 112	IEP	34 CFR §300.346(a)(1)(iii)	IEP - Evidence that the results of the student's performance on any state and/or district-wide assessment were considered by the IEP Team.	<p>Verify that the IEP Team report documented the consideration of the student's performance on any state or district-wide assessment.</p> <p>State assessment - The results of any state assessment in the Michigan educational assessment system must be considered:</p> <ul style="list-style-type: none"> <li>- Michigan Educational Assessment Program (MEAP);</li> <li>- Michigan's Alternative Assessment Program (MI-ACCESS);</li> <li>- English Language Learners Assessment Program (ELL-ACCESS)</li> </ul> <p>[Students not taking the MEAP due to native language exception who have been in the country for less than three (3) years], or,</p> <ul style="list-style-type: none"> <li>- Whatever the IEP Team has determined as the state alternative, as reported on the "MI-ACCESS determined by the IEP Team form."</li> </ul> <p>Note that for "Supported Independence," students are designated by age, and not grade.</p> <p>State and/or district-wide testing - the results of the most recent statewide and/or district-wide assessment must be considered as part of each IEP Team meeting.</p> <p>"Not applicable" will not be accepted beginning the year following the administration of first statewide or district-wide assessment in which the student participated. If the student participated in the National Assessment of Educational Progress (NAEP), the results must also be considered.</p>
Review Type File and Program/Service 113	IEP	34 CFR §300.346(a)(1)(i)	IEP - Evidence that the strengths of the student were considered by the IEP Team.	<p>Verify that the IEP Team report documented the consideration of the strengths of the student.</p>

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Review Type File and Program/Service 114	IEP		IEP - Evidence that the parent's concerns for enhancing the education of the student were considered by the IEP Team.	Verify that the IEP Team report documented the consideration of parent's concerns for enhancing the education of the student.
34 CFR §300.346(a)(1)(i)				
Review Type File and Program/Service 115	IEP		IEP - Evidence that the anticipated needs or other matters of the student were addressed by the IEP Team.	Verify that the IEP Team report documented the consideration of anticipated needs or other matters of the student.
34 CFR §300.343(c)(2)(iv)-(v)				
Review Type File and Program/Service 116	IEP		IEP - Evidence that the student's expected progress toward the current IEP goals were addressed by the IEP Team.	Verify that the IEP Team report documented the consideration of the student's expected progress or lack of expected progress toward the current IEP goals.
34 CFR §300.343(c)(2)(i)				<u>Additional Information:</u> Note that the final IDEA regulation indicates "lack of expected progress."
Review Type File and Program/Service 117	IEP		IEP - Evidence that the student's expected or lack of expected progress in the general curriculum, where appropriate, was addressed by the IEP Team.	Verify that the IEP Team report documented the consideration of the student's expected or lack of expected progress in the general curriculum, where appropriate.
34 CFR § 300.343(c)(2)(i)				If there is not a general curriculum for comparable age students, this standard is "Not applicable."

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Review Type File and Program/Service 118	IEP		IEP - Evidence of present level of educational performance which describes how the student's disability affects his or her involvement in, and progress in, the general curriculum, as appropriate, including physical education.	Verify that the IEP Team report described how the student's disability affects his or her involvement in and progress in, the general curriculum, as appropriate, in the present level of educational performance statement.
R 340.1721e(2)(a) 34 CFR § 300.347(a)(1)(i)			<p>A) Baseline data.</p> <p>B) Explanation of assessment data for educational instruction.</p> <p>C) Impact on involvement/ progress in the general curriculum.</p> <p>D) Description of areas of educational needs.</p> <p>E) All areas of identified educational needs must be addressed in the following portions of the IEP:</p> <ul style="list-style-type: none"> <li>- Annual goals,</li> <li>- Supplementary aids/services,</li> <li>- Secondary transition services for students identified for whom secondary transition is appropriate.</li> </ul>	<p><u>Additional Information:</u></p> <p>A) Assessments include criterion-referenced tests, standard achievement tests, diagnostic tests, other tests, classroom performance data and documented systematic observations, or any combination of the above.</p> <p>B) Assessment data must be accompanied by a narrative summary that is sufficient to provide a foundation for education for planning (a starting point for instruction).</p> <p>C) Based on the student assessment data, determine the extent to which the student can be involved in, and progress in, the general curriculum.</p> <p>D) The purpose of using these assessments is to determine the student's present level of educational performance and the area(s) of need arising from the student's disability so that approaches for ensuring involvement and progress in the general curriculum and any needed adaptations or modifications to that curriculum can be identified.</p> <p>E) Review each area of educational need to determine if every area of educational need is addressed by an annual goal or a supplementary aid, service, accommodation, or modification. (For those students for whom secondary transition is appropriate the area of need may be identified.)</p> <p>34 CFR Appendix A to Part 300, Question #1, Page 12471          If a specially designed physical education program is provided by special education, determine an area of need arising from the students' disability so that approaches for ensuring involvement and progress in the general physical education curriculum and any needed adaptations or modifications to that curriculum can be identified. (See Std. #214.)</p>



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Review Type File and Program/Service 119	IEP	34 CFR § 300.347(a)(1)(ii)	<p>IEP - Evidence of the present level of educational performance, which describes for preschool students, as appropriate, how the student's disability affects his or her participation in appropriate activities.</p> <p>A) Baseline data,</p> <p>B) Explanation of assessment data for appropriate activities,</p> <p>C) Impact on involvement/progress in the appropriate activities,</p> <p>D) Description of areas of identified appropriate activity needs,</p> <p>E) Areas of identified appropriate activities must be addressed by an annual goal or a supplementary aid/service.</p>	<p>Verify that IEP Team report described how the student's disability affects involvement in and progress in appropriate activities in the present level of educational performance statement.</p> <p><u>Additional Information:</u>  A) Assessments include criterion-referenced tests, standardized tests, diagnostic tests, other tests, or any combination of the above.</p> <p>B) Test scores must be accompanied by a narrative summary of what they mean. This information shall be sufficient to complete planning for participation in appropriate activities.</p> <p>C) Based on the student assessment data determine the extent to which the student can be involved in appropriate activities.</p> <p>D) Use of these assessments is to determine the student's present levels of educational performance and the area(s) of need arising from the student's disability so that approaches for ensuring participation in appropriate activities and any needed adaptations or modifications that need to be made to participate in appropriate activities.</p> <p>E) Review each identified needed appropriate activity to determine if every identified appropriate activity is addressed by an annual goal or a supplementary aid/service, accommodation, or modification.</p> <p>"Appropriate activities" in this context refers to age relevant developmental abilities or milestones that the typically developing student of the same age would be performing or would have achieved. (34 CFR Appendix A to Part 300, Question #1, Page 12471.)</p>
Review Type File and Program/Service 120	IEP	34 CFR § 300.346(a)(2)(iv)	<p>IEP - Evidence that the communication needs of the student were considered by the IEP Team.</p>	<p>Verify that IEP Team report documented the consideration of the communication needs of the student.</p> <p>Any need identified by the IEP Team in the comment section under "special factors" must be reflected in the IEP Team report in areas such as supplementary aids and services or programming modifications and will be reflected in standard #106.</p>
Review Type File and Program/Service 121	IEP	34 CFR § 300.346(a)(2)(i)	<p>IEP - Evidence that positive behavior interventions, strategies, and supports to address the behavior that impedes learning, or the learning of others, were considered by the IEP Team.</p>	<p>Verify that IEP Team report documented the consideration of positive behavior interventions, strategies, and supports to address the needs of the student whose behavior impedes learning or the learning of others.</p>
Review Type File and Program/Service 122	IEP	34 CFR § 300.346(a)(2)(ii)	<p>IEP - Evidence that the language needs for students with limited English proficiency were considered by the IEP Team.</p>	<p>Verify that IEP Team report documented the consideration of the language needs for students with limited English proficiency.</p>

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Review Type File and Program/Service 123	IEP		IEP - Evidence that the need for braille instruction for students who are blind or visually impaired were considered by the IEP Team.	Verify that IEP Team report documented the consideration of the need for Braille instruction for students who are blind or visually impaired.
34 CFR §300.346(a)(2)(iii)				
Review Type File and Program/Service 124	IEP		IEP - Evidence that the communication and language needs for the students who are deaf or hearing impaired were considered by the IEP Team.	Verify that IEP Team report documented the consideration of the communication and language needs for the students who are deaf or hearing impaired.
34 CFR §300.346(a)(2)(iv)				<u>Additional Information:</u> Consider the student's language and communication needs, opportunities for direct communication with peers and professional personnel in the student's language, communication mode, academic level, and full range of needs including opportunities for direct instruction in the student's language and communication mode.
Review Type File and Program/Service 125	IEP		IEP - Evidence that assistive technology devices and services for the student were considered by the IEP Team.	Verify that IEP Team report documented the consideration of assistive technology devices and services for the student.
34 CFR §300.346(a)(2)(v) 34 CFR §300.308				<u>Additional Information:</u> Assistive Technology - 34 CFR §300.308  Assistive technology devices or technology services, or both as defined in 34 CFR §300.5 and 34 CFR §300.6, are made available as part of the student's: <ol style="list-style-type: none"> <li>1) Special Education program (34 CFR §300.26),</li> <li>2) Related services (34 CFR §300.24), and/or</li> <li>3) Supplementary aids/services [34 CFR §300.28 and 34 CFR §300.550(b)(2)].</li> </ol>
Review Type File and Program/Service 126	IEP		IEP - Evidence that special factors, interventions, accommodations, and/or other program modifications required to receive FAPE, were considered by the IEP Team.	Verify that IEP Team report documented the consideration of special factors, interventions, accommodations, and/or other program modifications that are required to receive FAPE.
34 CFR §300.346(c)				

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Review Type File and Program/Service 127	IEP		IEP - Evidence of student's measurable annual goals meeting the student's needs that result from the student's disability to enable involvement in, and progress in, the general curriculum.	<p>Verify that IEP Team report included annual goal(s) relating to:</p> <ul style="list-style-type: none"> <li>- meeting the student's needs that result from the student's disability to enable the student to be involved in, and progress in, the general curriculum; and/or</li> <li>- meeting each of the student's other educational needs that result from the student's disability.</li> </ul> <p><u>Additional Information:</u>            Goal statements indicate the progress which can be reasonably expected of a student with a disability in a twelve (12) month time period.</p> <p>A public agency is not required to include IEP annual goals that relate to areas of the general curriculum in which the student's disability does not affect his or her ability to be involved in, and progress in, the general curriculum.</p> <p>If a student with a disability needs only modification or accommodations to progress in an area of the general curriculum, the IEP does not need to include a goal for that area. However the IEP would need to specify those modifications or accommodations. (34 CFR Appendix A to Part 300, Question #1, Page 12471 and Question #4, Page 12472.)</p> <p>Modifications and accommodations that are part of supplementary aids and services may be provided through general education. These do not require annual goals.</p> <p>An annual goal must be related to an area of identified need in the present level of educational performance statement. [34 CFR §300.350(b)]</p>
Review Type File and Program/Service 128	IEP		IEP - Evidence of short-term objectives (STOs).	<p>Verify that IEP Team report documented a minimum of two (2) STOs for each annual goal. STOs are intermediate steps toward goal achievement.</p> <p><u>Additional Information:</u>            STOs are intermediate steps that will enable parents, students, and educators to monitor progress during the year, and, if appropriate, to revise the IEP consistent with the student's instructional needs.</p> <p>If there is only one STO for the annual goal the standard is "Out-of-compliance."</p> <p>See 34 CFR Appendix A to Part 300, Question #1, Page 12471.</p>

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Review Type File and Program/Service 129	IEP		IEP - Evidence of STOs containing criteria.	Verify that IEP Team report included objective criterion which must be observable and measures the completion of each STO.  <u>Additional Information:</u> Performance criterion could be written in terms of accuracy, percentage rate, or production. Indicate the specific criteria (e.g. 90% accuracy, four out of five times, three times daily).  Look for an indication of criterion for each STO by checking the IEP Team report, records of data collected, observation logs, etc.  In a program and/or service interview, there must be documentation that data regarding STO criterion attainment is being collected and maintained.
R 340.1721e(2)(c)				
Review Type File and Program/Service 130	IEP		IEP - Evidence of STOs containing evaluation procedures.	Verify that the IEP Team report included evaluation procedures which may be incorporated into the STOs.  <u>Additional Information:</u> The evaluation procedure describes the method(s) by which achievement is measured, such as documented teacher observation, standardized tests, or informal tests.  In a program and/or service interview, documentation must be provided that the evaluation procedures are being implemented for each STO.
R 340.1721e(2)(c)				
Review Type File and Program/Service 131	IEP		IEP - Evidence of STOs containing schedules for determining whether the objectives are being achieved.	Verify that there are schedules for determining whether the objectives are being achieved.  <u>Additional Information:</u> The schedule is the frequency of the evaluation of the STO.  If the STO is being used to measure progress toward the annual goal, the schedule for determining whether the objectives are being achieved must be at least as often as progress is reported to the parents.
R 340.1721e(2)(c)				
Review Type File and Program/Service 132	IEP		IEP - Evidence of benchmarks.	For districts using benchmarks, verify that there are STOs which correlate with those benchmarks.  <u>Additional Information:</u> Benchmarks are major milestones that enable parents, students, and educators to monitor progress during the year, and, if appropriate, to revise the IEP consistent with the student's instructional needs. (34 CFR Appendix A to Part 300, Question #1, Page 12471.)  While Michigan rules currently require short-term objectives, benchmarks are optional.
34 CFR §300.347(a)(2)				
Review Type PROGRAM/SERVICE 133	IEP		IEP - Evidence of how the student's parents will be regularly informed of progress towards the student's annual goals.	Verify that IEP Team report included a statement of how the student's parents will be regularly informed of progress toward the achievement of the student's annual goal(s).
34 CFR § 300.347(a)(7)(ii)				

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Review Type				
134	IEP		IEP - Evidence of when the student's parents will be regularly informed of progress towards the student's annual goals.	Verify that IEP Team report included a statement of when the student's parents will be regularly informed of progress toward the achievement of the student's annual goals.  <u>Additional Information:</u> Parents of students with disabilities must be regularly informed of their student's progress towards annual goals, at least as often as parents are informed of their non-disabled children's progress.
34 CFR § 300.347(a)(7)(ii)				
Review Type				
File and Program/Service				
136	IEP		IEP - Evidence of the extent to which the student will not participate with non-disabled students in the general education class (program).	Verify that the IEP Team report indicated the extent to which the student will not participate with non-disabled students in the general education class (program) or instructional areas.  <u>Additional Information:</u> The IEP Team begins with the premise that the student will participate at "all times" in the general education class (program) and then specifies the exception(s) to that full participation on the IEP Team report.  Check the IEP Team report for documentation.  A statement of time, without explanation, is not sufficient to meet the requirements of this standard.  If there is full participation, it must be stated on the IEP Team report so that it is clear to all members of the IEP Team. A "blank" is not acceptable.  Look for information which clearly identifies the general education classes in which the student will not participate, for example: <ul style="list-style-type: none"> <li>- the student will not participate in the general education math class.</li> </ul> Review the IEP Team report specifications for special education classroom placement to determine the extent to which the student will not participate in the general education program.  Refer to 34 CFR Appendix A to Part 300, Question #1, Page 12471.
34 CFR § 300.347(a)(4)				

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Review Type File and Program/Service 137	IEP		IEP - Evidence of the extent to which the student will not be involved, and progress in, the general curriculum.	<p>Verify that the IEP Team report identified the general curriculum area(s) in which the student will not be involved.  [34 CFR §300.347(a)(4)]</p> <p><u>Additional Information:</u>  The IEP Team begins with the premise that the student will participate at “all times” in the general curriculum and then specifies the exception(s) to that full participation on the IEP Team report.</p> <p>Elementary:</p> <ul style="list-style-type: none"> <li>- Special education teachers may provide support in the general education curriculum (this support is considered as participating in the general curriculum).</li> <li>- Special education teachers may provide either special education instruction/curriculum or general education curriculum/instruction. The IEP Team determines the extent to which the general curriculum is being provided by the special education teacher, giving consideration to accommodations/modifications of instructional content and/or student performance expectations.</li> </ul> <p>Secondary:</p> <ul style="list-style-type: none"> <li>- Special education teachers may provide support in the general education curriculum (this support is listed as participation in the general curriculum).</li> <li>- Special education teachers must deliver instruction in special education courses or courses approved for graduation through a special education curriculum (these courses are listed as a time when the student is not participating in the general education curriculum).</li> </ul> <p>If there is full participation, it must be stated on the IEP Team report so that it is clear to all members of the IEP Team. A “blank” is not acceptable.</p> <p>When the secondary special education teacher is responsible for teaching and grading a content area subject it must be counted as special education curriculum. Identify the special education programs and services the student receives when removed from participation with non-disabled peers in the general education instructional setting and the extent to which those programs/services are provided.</p> <p>Refer to 34 CFR Appendix A to Part 300, Question #1, Page 12471.</p>

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Review Type File and Program/Service 138			IEP - Evidence of the extent to which the student will not participate with non-disabled students in extracurricular and nonacademic activities.	<p>Verify that the IEP Team report identified the extent to which the student will not participate in extracurricular and nonacademic activities with non-disabled students.</p> <p><u>Additional Information:</u>  The IEP Team begins with the premise that the student will participate at “all times” with nondisabled students in extracurricular and nonacademic activities and then specifies the exception(s) to that full participation on the IEP Team report.</p> <p>Look for a list of the extracurricular and nonacademic activities in which the student will not participate with non-disabled students on the IEP Team report.</p> <p>If there is full participation, it must be stated on the IEP Team report so that it is clear to all members of the IEP Team. A “blank” is not acceptable.</p> <p>Nonacademic and extracurricular services and activities may include counseling services, athletics, transportation, health services, recreational activities, special interest groups or clubs sponsored by the public agency, referral to agencies that provide assistance to individuals with disabilities and employment of students, including both employment by the public agency and assistance on making outside employment available.  (34 CFR §300.306)</p> <p>In providing or arranging for the provision of nonacademic and extracurricular services and activities, including meals, recess periods, and the services and activities set forth in 34 CFR §300.306, each public agency shall ensure that each child with a disability participates with non-disabled children in those services and activities to the maximum extent appropriate to the needs of the child. (34 CFR §300.553)</p> <p>Refer to 34 CFR Appendix A to Part 300, Question #1, Page 12471.</p>
Review Type File and Program/Service 141	IEP		IEP - Evidence of the specific special education programs and services to be provided including amount of time, frequency, and location.	<p>Verify that the IEP Team report documented the specific special education programs and/or services to be provided to the student.</p> <p><u>Additional Information:</u>  Program(s) and service(s) must be described by the title, rule number, location, amount of time, and frequency [34 CFR §300.347(a)(6)].</p> <p>The amount of time is indicated in minutes/hours per day/week/month that each program and/or service is to be provided. The frequency is “how often” the program/service is to be provided per day/week/month. The amount of programs/services to be provided must be:</p> <ul style="list-style-type: none"> <li>- Stated in the IEP Team report so that the agency’s commitment of resources will be clear to parents and other IEP Team members and all involved in the implementation of the IEP; and</li> <li>- Appropriate to that specific service.</li> </ul>
Review Type File and Program/Service 142	IEP		IEP - Evidence of specialized transportation.	<p>Verify that it was documented by the IEP Team if the student is receiving specialized transportation.</p> <p><u>Additional Information:</u>  Transportation may be noted as a supplementary aid/service.</p>
34 CFR §300.347(a)(4) 34 CFR §300.347(a)(3)(ii)				
34 CFR §300.347(a)(3)				
34 CFR §300.347(a)(6)				
34 CFR §300.24(a)				
34 CFR §300.24(b)(15)				

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Review Type				
143	IEP		IEP - Evidence of the supplementary aids and services to be provided to the student, or on behalf of the student, and of the program modifications or supports for the school personnel that will be provided for the student.	<p>Verify that the IEP Team report documented the supplementary aids and services to be provided to the student, or on behalf of the student, and program modifications or supports for the school personnel that will be provided for the student.</p> <p><u>Additional Information:</u>  Also refer to 34 CFR Appendix A to Part 300, Question #1, Page 12471.</p>
34 CFR §300.347(a)(3)				
34 CFR §300.28				
Review Type				
File Review				
144	IEP		IEP - Evidence of the beginning date, frequency, location, and duration of the supplementary aids and services, and program modifications.	<p>Verify that the IEP Team report documented that the beginning date, frequency, location, and duration of the supplementary aids and services and program modification(s) were addressed.</p> <p><u>Additional Information:</u>  If "As needed" is used to describe the frequency of supplementary aid(s), service(s), and/or program modification(s) the conditions under which the student requires the aid(s), service(s), and/or program modification(s), must be specified.</p> <p>For example:</p> <ul style="list-style-type: none"> <li>- Calculator "as needed" for computation of equations in math and science classes.</li> <li>- Oral testing "as needed" in place of written essays in academic classes.</li> <li>- SSW service "as needed" when the student displays disruptive "acting out" behaviors.</li> </ul>
34 CFR §300.347(a)(6)				
Review Type				
File and Program/Service				
146	IEP		IEP - Evidence of a statement of transition service needs focusing on courses of study beginning at age fourteen (14).	<p>Verify that the IEP Team report includes a statement of specific transition-related content focusing on the courses of study beginning no later than age fourteen (14).</p> <p><u>Additional Information:</u>  Although the focus of the transition planning process may shift as the student approaches graduation, the IEP Team must discuss courses of study beginning at age fourteen (14) and at each IEP thereafter [consider at age thirteen (13)]. (34 CFR Appendix A to Part 300, Question #11, pg. 12474-5.)</p> <p>34 CFR §300.347(b)(1)(i) References the examples of:</p> <ul style="list-style-type: none"> <li>- Participation in advanced placement courses, or</li> <li>- Participation in a vocational education program.</li> </ul> <p>Other examples of 'courses of study' may include general and/or special education classes leading to a diploma or a course of study leading to a certificate of completion.</p> <p>See 34 CFR Appendix A to Part 300, Question #11, Page 12474-5.</p>
34 CFR §300.347(b)(1)				



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<b>Std. No.</b>	<b>Std. Type</b>	<b>Rule No.</b>	<b>Standard</b>	<b>Documentation and Verification Criteria</b>
Review Type File and Program/Service 147	IEP		IEP - Evidence that the agency representative from other agencies responsible for providing/paying for transition were invited (must include other measures to obtain agency participation).	<p>Verify that the IEP Team report documented that the agency representative from other agencies responsible for providing/paying for transition services were invited to the IEP Team meeting.</p> <p><u>Additional Information:</u>  The invitation to the meeting may be documented by the signature of the agency representative on the IEP Team report, a copy of the invitation to the IEP Team meeting, phone logs, or other documentation.</p> <p>34 CFR §300.344(b)(3)(i) requires that in implementing the requirements of 34 CFR §300.347(b)(1) requiring a statement of needed transition services, the public agency shall also invite a representative of any other agency that is likely to be responsible for providing or paying for transition services.</p> <p>To meet this requirement, the public agency must:</p> <ul style="list-style-type: none"> <li>- Identify all agencies that are 'likely to be responsible for providing or paying for transition services' for each student addressed by 34 CFR §300.347(b)(2),</li> <li>- Invite each of those agencies to the IEP Team meeting... if the IEP Team identifies additional agencies that are likely to be responsible for providing or paying for transition services for the student, the public agency must determine how it will meet the requirements of 34 CFR §300.344(b)(3)(i).</li> </ul> <p>See 34 CFR Appendix A to Part 300, Question #13, Page 12475.</p>
Review Type File and Program/Service 148	IEP		IEP - Evidence that the student, not later than age fourteen (14) or younger if determined appropriate, was invited to the IEP Team meeting, if a purpose of the meeting was the consideration of transition needs.	<p>Verify that the student was invited to the IEP Team meeting if a purpose of the meeting was the consideration of transition needs.</p> <p><u>Additional Information:</u>  The invitation must be documented by the student signature on the IEP Team report, or the invitation letter which includes the student.</p> <p>The student must be invited if the IEP will be in effect when the student reaches the fourteenth (14th) birthday.</p> <p>Refer to 34 CFR Appendix A to Part 300, Question #6, Page 12473.</p>
Review Type File and Program/Service 149	IEP		IEP - Evidence that the preferences and interests of the student were considered.	<p>Verify that the IEP Team report documented the consideration of the student's preferences and interests at the IEP Team meeting.</p> <p><u>Additional Information:</u>  Student interest assessments and profiles, anecdotal records, student portfolios, may also serve as documentation sources for the IEP Team to consider.</p> <p>If the student attended the IEP Team meeting, the standard is "In-compliance."</p> <p>Refer to 34 CFR Appendix A to Part 300, Question #6, Page 12473.</p>

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Review Type File and Program/Service 150	IEP		IEP - Evidence that if the student does not attend, the public agency shall take other steps to ensure that the students' preferences and interests are considered.	Verify that there is a description of the steps the agency took to ensure that the student's preferences and interests were considered.  <u>Additional Information:</u> Student interest assessments and profiles, anecdotal records, and student portfolios, may also serve as documentation of the resources used to ensure that the preferences and interests of the student are considered if the student did not attend.  If the student attended the IEP Team meeting, mark the standard "Not applicable."  Refer to 34 CFR Appendix A to Part 300, Question #6, Page 12473.
34 CFR §300.344(b)(2)				
Review Type File and Program/Service 151	IEP		IEP - Evidence that the IEP Team provided a statement of needed transition services not later than age sixteen (16) (or younger, if determined appropriate), which includes one or more of the following areas: A) instruction; B) related services; C) community experiences; D) employment and/or adult living objectives; and E) acquisition of daily living skills, and functional vocational evaluation (if appropriate).	A statement of needed transition services, or an explanation of transition services, not later than age sixteen (16) are needed in one (1) or more of the following areas: A) instruction; B) related services; C) community experiences; D) outcomes/options related to employment and/or adult living; E) acquisition of daily living skills and functional vocational evaluation (if appropriate).  <u>Additional Information:</u> The transition services should be developed in the first IEP after the student turns fifteen (15) years of age. If not addressed by the student's sixteenth (16th) birthdate, this standard is "Out-of-compliance."  Refer to attachment #1 to 34 CFR §300, analysis of comments and changes, Page 12663.
34 CFR §300.29 34 CFR §300.347(b)(2)				
Review Type File and Program/Service 152	IEP		IEP - Evidence of a statement that the student has been informed of his or her rights under this title, if any, that will transfer to the student upon reaching the age of majority under section 615(m) [IDEA 97], beginning at least one year before the student reaches the age of majority, under state law.	Verify that IEP Team report documented that the student was informed of the transfer of rights [at age sixteen (16)] at least one year before [at age seventeen (17)] reaching the age of majority [at age eighteen (18)] under state law.  <u>Additional Information:</u> This standard is "In compliance" if: - The signature of the student is on the IEP team report (if this standard is addressed on the IEP Team report). - There is a letter in the file which provides documentation.
34 CFR §300.347(c) 34 CFR §300.517				
Review Type FILE 153	IEP		IEP - Evidence that the agency shall notify the student reaching the age of majority, and his or her parents, of the transfer of parental rights.	Verify that the student and parent(s) were notified by the agency of the transfer of parental rights when the student reaches the age of eighteen (18).  <u>Additional Information:</u> This standard is "In-compliance" if: - The signature of the student is on the IEP team report (if this standard is addressed on the IEP Team report). - There is a letter in the file which provides documentation.
34 CFR §300.517				

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<b>Std. No.</b>	<b>Std. Type</b>	<b>Rule No.</b>	<b>Standard</b>	<b>Documentation and Verification Criteria</b>
Review Type File and Program/Service 154	IEP		IEP - Evidence of a description of each participating agency's responsibility and/or linkage if appropriate.	Verify that the IEP Team report describes each participating agency's responsibility and/or linkage, if appropriate.  <u>Additional Information:</u> There is a requirement of a broader focus on coordination of services across agencies and linkages between agencies beyond the local school district. See 34 CFR Appendix A to Part 300, Question #11, Page 12475.
34 CFR §300.344(b)(3)				
Review Type File and Program/Service 155	Adm Int		IEP - Evidence of a statement that, if the participating agency failed to provide transition services, the public agency responsible for the student's education shall initiate a meeting to identify alternative strategies and, if necessary, revise the IEP.	Verify that the public agency responsible for the student's education has a procedure for initiating a meeting to identify alternative strategies and, if necessary, revise the IEP if a participating agency failed to provide transition services.  <u>Additional Information:</u> The standard is "In-compliance" if the statement appears on the IEP Team report, or if there is evidence that the agency has a documented procedure which addresses the requirements.  If an agreed upon service by another agency is not provided, the public agency responsible for the student's education must implement alternative strategies to meet the student's needs.  This requires that the public agency provide the services, or convene an IEP meeting as soon as possible to identify alternative strategies to meet the transition services objectives, and to revise the IEP Team report accordingly. Alternative strategies might include the identification of another funding source referral to another agency. The public agency's identification of other district-wide or community resources that it can use to meet the student's identified needs appropriately, or a combination of those strategies. (34 CFR Appendix A to Part 300, Question #12, Page 12475.)
34 CFR §300.344(b)(3)(ii)				
Review Type File and Program/Service 155a	IEP		IEP - Evidence that the IEP Team considered the need for a special teacher endorsed in a particular disability category.	Verify that the IEP Team determined whether the student has a need for placement with a special education teacher with a particular endorsement.  <u>Additional Information:</u> It is not required that the teacher's endorsement match the disability of the student. If a need is identified, the teacher's endorsement must be specified.  This subrule takes effect on 7/01/03.
R 340.1721e(3)				
Review Type File and Program/Service 156	IEP		IEP - Evidence of the anticipated initiation date for special education program(s) and/or service(s).	Verify by checking the IEP Team report that the anticipated initiation date for special education programs and/or services is written on the IEP Team report.  <u>Additional Information:</u> The IEP Team report must indicate the projected initiation date for each program and/or service. Each program and/or service must be specifically stated (month/day/year or "first day of school"). This information will be found in the "proposed initiation date" section of the IEP form.
34 CFR §300.347(a)(3)				

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<b>Std. No.</b>	<b>Std. Type</b>	<b>Rule No.</b>	<b>Standard</b>	<b>Documentation and Verification Criteria</b>
Review Type File and Program/Service 157	IEP		IEP - Evidence of a projected duration date of special education programs and services.	Verify that the IEP Team report documented the projected duration date for special education programs and/or services.  <u>Additional Information:</u> The IEP Team report must indicate the duration date for each program and/or service. The duration date of the program and/or service must not extend beyond the date of the one year anniversary date of the IEP Team report.  This information will be found in the duration section of the IEP Team report. The phrase "one school year" is not acceptable. Month/day/year are required.
34 CFR §300.347(a)(6) 34 CFR §300.347(a)(3)				
Review Type File and Program/Service 158	IEP		IEP - Evidence that the IEP Team report documented if the needs of the student require special education programs and/or services beyond the regular/current school year.	Verify that the IEP Team report documented the consideration of the need for special education programs and/or services beyond the regular/current school year.  <u>Additional Information:</u> Extended school year (ESY) services must be provided only if the child's IEP Team determines, on an individual basis, in accordance with 34 CFR §300.340 - 34 CFR §300.350, that the services are necessary for the provision of FAPE. Consideration of an extended school year must not be limited to particular categories of disabilities. The agency must not unilaterally limit the type, amount, or duration of ESY specified services. ESY includes special education and related services that are provided to the student beyond the school year and must be provided at no cost to the parent. (34 CFR §300.309)
34 CFR §300.309				
Review Type File and Program/Service 159	IEP		IEP - Evidence of the student's participation in state assessment(s), or any part of the state assessment(s).	Verify that the IEP Team report documented the student's anticipated/planned participation in the state assessment(s) or any part of the state assessment(s).  <u>State Assessment</u> Participation in any state assessment in the Michigan Educational Assessment System (MEAS) must be identified: - MEAP; - MI-ACCESS; - ELL-ACCESS [Students not taking the MEAP due to native language exception who have been in the country for less than three (3) years], or - Whatever the IEP Team has determined as the state alternative, as reported on the "MI-ACCESS determined by the IEP Team form."  Note that for "supported independence," students are designated by age, and not grade.  <u>National Assessment of Educational Progress (NAEP)</u> If the school district participated in the NAEP, participation of the student must also be specified.
34 CFR §300.347(a)(5)(ii)				

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<b>Std. No.</b>	<b>Std. Type</b>	<b>Rule No.</b>	<b>Standard</b>	<b>Documentation and Verification Criteria</b>
Review Type File and Program/Service 160	IEP	34 CFR § 300.347(a)(5)(ii)	IEP - Evidence of the student's participation in district assessment(s) or any part of the district-wide assessment(s).	Verify that the IEP Team report documented the student's anticipated/planned participation in district-wide assessment(s) or any part of the district-wide assessment(s).  <u>District</u> Participation in any district assessment must be identified.
Review Type File and Program/Service 161	IEP	34 CFR § 300.347(a)(5)(i)	IEP - Evidence of a statement of the accommodations or modifications required for participation in the state and/or district-wide assessment(s), if required.	Verify that the IEP Team report describes the accommodations or modifications required for the student to participate in the state and/or district-wide assessments.  Accommodations must be indicated for each individual assessment or individual component that is part of the individual assessment.  <u>Additional Information:</u> Accommodations or modifications may not be required. Refer to 34 CFR §300.138; 34 CFR Appendix A to Part 300, Question #1, Page 12472.
Review Type File and Program/Service 162	IEP	34 CFR §300.347(a)(5)(ii)(a)	IEP - Evidence of a statement which indicates why the state and/or district-wide assessment(s) is/are inappropriate and if the IEP Team determined that the student will not participate in the state or district-wide assessments.	Verify that the IEP Team report describes why the state and/or district-wide assessment(s) is/are inappropriate.  <u>Additional Information:</u> If the assessment(s) are considered to be appropriate for the student, mark the standard 'Non-applicable.'
Review Type File and Program/Service 163	IEP	34 CFR § 300.347(a)(5)(ii)(b)	IEP - Evidence of a statement which indicates how the student will be assessed if the state and/or district-wide assessment(s) is/are inappropriate and if the IEP Team determined that the student will not participate in the state or district-wide assessments.	Verify that the IEP Team report describes how the student will be assessed if the state and/or district-wide assessment(s) is/are inappropriate.  <u>Additional Information:</u> If the state or district-wide assessment(s) are considered to be appropriate, the standard is "Not applicable" to the student.  Refer to 34 CFR Appendix A to Part 300, Question #1, Page 12472.
Review Type Forms 164	Notice	34 CFR §300.550(b)(1)	IEP - Evidence that the public agency assured that to the maximum extent appropriate, students with disabilities, including students in public or private institutions or other care facilities, are educated with students who are non-disabled.	Verify that placement notice documented that the public agency assured education with persons who do not have disabilities.  <u>Additional Information:</u> Check for the signature of the superintendent or designee. The placement notice may be attached to the IEP Team report.
Review Type Forms 165	Notice	34 CFR §300.550(b)(2)	IEP - Evidence that the public agency assured that placement of a student with a disability in special classes, separate schools, or the removal from general education environment occurs only when the nature or severity of the disability is such that education in a general education program using supplementary aids and services cannot be satisfactorily achieved.	Verify that the notice documented that the public agency assured that placement of a student with a disability in special classes, separate schools, or the removal from general education environment occurs only when the nature or severity of the disability is such that education in a general education program using supplementary aids and services cannot be satisfactorily achieved.

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<b>Std. No.</b>	<b>Std. Type</b>	<b>Rule No.</b>	<b>Standard</b>	<b>Documentation and Verification Criteria</b>
Review Type Forms 166	Notice		IEP - Evidence that the public agency assured that the student was placed as close as possible to the student's home.	Verify that the notice documented that the public agency placed the student as close as possible to the child's home.
34 CFR §300.552(a)(3)				
Review Type Forms 167	Notice		IEP - Evidence that the public agency, in considering the least restrictive environment placement for the student, considered any potential harmful effects to the student in the quality of service which he/she needs.	Verify that the placement notice documented the public agency's assurance that the review of least restrictive environment placement options for the student considered any potential harmful effects to the student in the quality of services which he/she needs.
34 CFR §300.552(d)				
Review Type Forms 168	Notice		IEP - Evidence that the public agency assured that a student is educated in the school that he or she would be educated, if non-disabled, unless the IEP of the student with a disability requires some other arrangement.	Verify that the placement notice documented the student is educated in the school that he or she would attend if non-disabled, unless the IEP of the student with a disability requires some other arrangement.
34 CFR §300.352(c)				
Review Type Forms 168a	IEP		IEP - Evidence that the public agency assured that a student with a disability is not removed from education in age-appropriate general education programs solely because of needed modification in the general curriculum.	Verify that the placement notice documented the student with a disability is not removed from education in age-appropriate general education programs solely because of needed modification in the general curriculum.
34 CFR § 300.352(e)				
Review Type File and Program/Service 169	Notice		Notice - Evidence of an IEP implementer.	Verify that the placement notice indicated the implementer.
R 340.1722(2)				
Review Type Program/Service 170	Program/Service		Program/Service - Evidence that the professional staff implementing the program have access to the IEP Team report.	Verify that the IEP Team report is accessible to the professional staff responsible for its implementation.
34 CFR §300.342(2)				
<u>Additional Information:</u> Check for the name and/or title of the staff person on the placement notice.				
<u>Additional Information:</u> Interview the program and service providers.				
The program/service providers shall indicate how they have access to the IEP Team report.				

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<b>Std. No.</b>	<b>Std. Type</b>	<b>Rule No.</b>	<b>Standard</b>	<b>Documentation and Verification Criteria</b>
Review Type Administrative Interview 171	Adm Int		Administrative Interview - Evidence that there are procedures for informing each student's teacher(s) and/or provider(s) about his or her specific responsibilities related to implementing each student's IEP and the specific IEP authorized accommodations, modifications, and supports that must be provided for each student.	<p>Verify that there are procedures for informing teacher(s) and/or provider(s) regarding the specific responsibilities related to implementing the student's authorized IEP that must be provided including:</p> <ul style="list-style-type: none"> <li>- accommodations,</li> <li>- modifications, and</li> <li>- supports.</li> </ul> <p><u>Additional Information:</u>  Look for a district policy or memorandum which addresses this standard.</p> <p>Interview providers to determine that providers have been informed about their responsibilities related to implementing the student's IEP.</p>
34 CFR §300.342(b)(2)(3)				
Review Type Program/Service 172	Progress Report		Progress Report - Evidence that parents are regularly informed of their student's progress toward the annual goals, at least as often as parents are informed of their non-disabled child's progress.	<p>Verify that the student progress reporting form that indicates the student progress toward the IEP annual goal(s) was reported to the parent with at least the same frequency as parents are informed of their non-disabled child's progress.</p> <p><u>Additional Information:</u>  A method that public agencies could use in meeting this requirement would be to provide periodic report cards to the parents of students with disabilities that include both:</p> <ol style="list-style-type: none"> <li>(1) The grading information provided for all children in the agency at the same intervals, and</li> <li>(2) A report of the progress toward the annual goal(s), which is the information required by the standard.</li> </ol> <p>(34 CFR Appendix A to Part 300, Question #10, Page 12474)</p>
34 CFR §300.347(a)(7)(ii)(A)				
Review Type Program/Service 173	Progress Report		Progress Report - Evidence that parents are regularly informed of the extent to which their student's progress is sufficient to enable the achievement of the goal(s) by the end of the year, at least as often as parents are informed of their non-disabled student's progress.	<p>Verify that the student progress reporting form indicates that the parents were informed whether their student's progress is sufficient to enable the achievement of the goal(s) by the end of the year, and that it was reported to the parent with at least the same frequency as parents are informed of their non-disabled student's progress.</p> <p><u>Additional Information:</u>  Districts report to parents the extent to which the student's progress is sufficient to enable achievement by the termination (duration date) of the IEP.</p> <p>The reports are sent at the same time as reports are sent for general education students.</p>
34 CFR §300.347(a)(7)(ii)(B)				

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Review Type File 174	Notice	R 340.1722a(1)	Notice - Evidence that the resident district Superintendent, upon receipt of the IEP Team report, acted within seven (7) calendar days to appeal eligibility, or programs or services, or provided the parent with written notification of intent to implement.	<p>Check the notice to verify that the resident district, upon receipt of the IEP Team report, acted within seven (7) calendar days to either appeal eligibility, or programs or services, or provided the parent with written notification of intent to implement.</p> <p><u>Additional Information:</u>  Check the date on the written notice to determine:  1) If the parents were notified of the districts intent to implement the IEP, or  2) That there was notification from the district that it appealed the eligibility or the programs and/or services.</p> <p>The date of the notice must be within seven (7) calendar days upon the receipt of the IEP Team report.</p> <p>If standard #174 is "In compliance," standard #109 is "In compliance."</p>
Review Type File 175	Notice	R 340.1722a(1)	Notice - Evidence that the notice identified where the programs and or services are to be provided.	<p>Verify that the placement notice specified the locations of the special education program(s) and/or service(s).</p> <p><u>Additional Information:</u>  If there is only one building at a level (e.g., elementary), naming the level is sufficient. More than one building at each level requires the name of the school building.</p>
Review Type File 176	Notice	R 340.1722a(1)	IEP/Notice - Evidence that the notice identified when the individualized education program shall begin.	<p>Verify that the IEP Team report and/or placement notice specified when the individualized education program shall begin.</p> <p><u>Additional Information:</u>  Look for a written date. The specification of month, day, and year is required.</p> <p>"The first day of school" is an acceptable entry.</p>
Review Type File 177	IEP	R 340.1722a(3)	IEP - Evidence of written parental consent for initial placement.	<p>Verify on the initial IEP Team report that there is written parental consent for the initial placement of the student.</p> <p><u>Additional Information:</u>  The standard is "Not applicable" to a student who was previously determined eligible in another district or if the student was initially referred to special education more than three (3) years prior to monitoring.</p>
Review Type File 178	IEP	34 CFR §300.552(b)(1) 34 CFR §300.343(c)(1)	IEP/Annual Review - Evidence that the annual review took place every twelve (12) months.	<p>Verify that the current IEP Team report was developed less than twelve (12) months after the previous IEP Team report.</p> <p><u>Additional Information:</u>  Check the anniversary date of the previous IEP Team report by month, day, and year.</p> <p>Comparison to previous IEP Team report is "Not applicable" to a transfer student during the school year of transfer.</p>



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Review Type File 181	IEP	34 CFR §300.536(b)	Reevaluation - Evidence that a reevaluation of the student was conducted if conditions warrant a reevaluation, or if the child's parents or teacher request a reevaluation, but at least once every three years.	<p>Verify that there are no more than thirty-six (36) months (month/day/year) between eligibility IEP Team meetings.</p> <p><u>Additional Information:</u>  Check the previous eligibility IEP Team report and current eligibility IEP Team report to determine that there is no more than thirty-six (36) months (month/day/year) between them.</p> <p>This standard is "Not applicable" to transfer students during the school year of transfer, if monitored during the thirty (30) day timeline.</p>
Review Type File 182	MET	R 340.1721a	MET - Evidence that the evaluation was completed by a MET and presented at an IEP Team meeting.	<p>Verify that the current MET is complete and check the IEP Team report for the signature of the MET representative.</p>
Review Type File 184	IEP	R 340.1722e(1)(a)	Previous Enrollment - Evidence of written parental consent to implement the transfer student's current IEP or place the student in an appropriate program or service.	<p>Verify that there is written parental consent to implement the transfer student's current IEP or place the student in an appropriate program.</p> <p><u>Additional Information:</u>  This standard is "Not applicable" if the student transferred in more than three (3) years prior to monitoring.</p> <p>For a temporary placement, the district may use a thirty (30) day placement form for documentation.</p> <p>For placement using the existing IEP, the district may use a signed placement form for documentation.</p>
Review Type File 185	IEP	R 340.1722e(1)(b)	Previous Enrollment - Temporary Placement - Evidence that the IEP Team meeting was held within thirty (30) school days from placement.	<p>Check the written date of transfer placement [or the written parental consent for thirty (30) day placement form, if used by the district] and the date of the IEP Team report to assure that the meeting was conducted within thirty (30) school days for the student transferring to a new school district which necessitates a change in educational status.</p> <p><u>Additional Information:</u>  The standard is "Not applicable" if the student transferred in more than three (3) years prior to the special education monitoring review.</p>

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Review Type File 186	IEP		Previous Enrollment - Temporary Placement - Evidence that the IEP Team reviewed or revised the IEP.	<p>Verify that the IEP Team report was revised or reviewed for the student transferring to a new school district which necessitates a change in educational status.</p> <p>If the parent does not provide consent for placement, then the school district will implement the student's current IEP to the extent possible and an IEP Team meeting shall be conducted as soon as possible, but not later than 30 school days per the requirements of standard #185.</p> <p>If the parent refuses consent, the standard is "Not applicable."</p> <p><u>Additional Information:</u> This standard is "Not applicable" if the student transferred in more than three (3) years prior to monitoring.</p>
R 340.1722e				
Review Type Program/Services 200	Program		Programs - Evidence that special education classrooms have the same following conditions as general education classrooms in the school district: average number of square feet per student, ventilation and heat conditions.	<p>Verify that special education classrooms have the same following physical conditions as general education classrooms in the school district:</p> <ul style="list-style-type: none"> <li>-average number of square feet per student,</li> <li>-light,</li> <li>-ventilation, and</li> <li>-heat conditions.</li> </ul> <p><u>Additional Information:</u> It may be necessary to measure the room, check the site plan, building blue print, or building diagram.</p> <p>Identify all concerns and interview staff involved to develop a corrective action (CA) plan.</p>
R 340.1733(a)				
Review Type Program/Services 201	Program		Programs - Evidence that the special education classroom is located in a school building housing general education pupils of comparable age and grade level unless set forth in the ISD plan.	<p>Verify the location of the classroom through the monitor's observation and ISD plan.</p> <p><u>Additional Information:</u> If the classroom is located in a portable unit, check to see if a general education classroom is also in a portable unit.</p> <p>Check the ages and grade levels of the general education students housed in the building. Compare to the ages and grade levels of special education students.</p>
R 340.1733(d)				
Review Type Program/Service 203	Service		Services - Evidence that light, ventilation, and heat conditions are the same as general education classrooms within the building.	<p>Verify by interviewing all staff providing services to the student that the following conditions of the special education service areas are the same as general education classrooms:</p> <ul style="list-style-type: none"> <li>- light,</li> <li>- ventilation,</li> <li>- heat conditions.</li> </ul> <p><u>Additional Information:</u> Compare this information with the monitor's observation.</p> <p>Identify all concerns and develop a corrective action plan.</p> <p>Related service personnel shall have space that is appropriate for the kind of service being delivered to afford individual and small group work.</p>
R 340.1733(a)				

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Review Type Program/Service 204 R 340.1733(b)	Program		Programs - Evidence that the age range discrepancy shall not exceed six (6) years for students in programs for the severely cognitively impaired and in programs for the severely multiply impaired under age sixteen (16).	<p>Verify by checking birth date on class lists that the age range does not exceed six (6) years for students in programs for the severely cognitively impaired and in programs for the severely multiply impaired under age sixteen (16).</p> <p><u>Additional Information:</u> Check the ISD plan to determine if the age range requirement is addressed and modified.</p>
Review Type Program/Service 205 R 340.1733(c)	Program		Programs - Evidence that the age range for students in special education programs, except those identified in R 340.1733(b) operated in a separate facility, shall not exceed four (4) years for students under age sixteen (16).	<p>Verify by checking the birth date on class lists that the age range does not exceed four (4) years for students under age sixteen (16), except those stated in standard #204 operated in a separate facility.</p> <p><u>Additional Information:</u> The age range is based on the month/day/year.</p> <p>Monitor one of the following standards: #205, #206, or #207.</p> <p>If the program is Moderately Cognitively Impaired and the age span exceeds four (4) years, consult the ISD plan.</p>
Review Type Program/Service 206 R 340.1733(d)	Program		Programs - Evidence that the age range for students in special education programs, except for programs for students with severe cognitive impairment and severe multiple impairments, operated in an elementary building shall not exceed six (6) years or the age span of students without disabilities in the building, whichever is less.	<p>Verify by checking the date of birth on class lists to verify that the age range for special education programs (except for programs for students with severe cognitive impairments and severe multiple impairments operated in an elementary building) does not exceed six (6) years or the age span of students without disabilities in the building, whichever is less.</p> <p><u>Additional Information:</u> Check the age range. The age range is based on the month/day/year.</p> <p>Monitor one of the following standards: #205, #206, or #207.</p>
Review Type Program/Service 207 R 340.1733(e)	Program		Programs - Evidence that the age range for students, except for programs for students with severe cognitive impairment(s) and severe multiple impairment(s), in secondary buildings shall not exceed the age span of students without disabilities in the building, except in high school buildings where students up to twenty-six (26) years of age may be served.	<p>Verify by checking the dates of birth on class lists to verify that the age range for students (for programs for students with severe cognitive impairment and severe multiple impairments), shall not exceed the age range of students without disabilities in the building, except in high school buildings where students up to twenty-six (26) years of age may be served.</p> <p><u>Additional Information:</u> Check the age range. The age range is based on the month/day/year.</p> <p>Monitor one of the following standards: #205, #206, or #207.</p> <p>Expanded age ranges for programmatic feasibility and meeting the needs of students, for students in programs for students with severe cognitive impairment, severe multiple impairments, and moderate cognitive impairments must be addressed in the ISD Plan.</p>

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Review Type Program/Service 209	Program/ Service	34 CFR §300.350(a)(1)	Programs/Services - Evidence that the instructional program focuses on the individual needs as determined by the IEP Team.	Verify that the scheduled instructional activities directly relate to the individual needs of the student identified in the present level of performance and to the annual goals and STOs authorized by the IEP Team.  <u>Additional Information:</u> Check the IEP Team report, instructional schedule, lesson plans, and interview the provider for verification that instruction is individualized.
Review Type Program/Service 211	Program/ Service	R 340.1733(g)	Programs/Services - Evidence that supplies and equipment shall at least be equal to those provided to other students in general education programs in addition to those supplies and equipment necessary to meet the student's individualized education program.	Verify that adequate supplies and equipment are available to meet the student's individualized education program by reviewing the IEP Team report and interviewing the provider. It may be necessary to review the supply and equipment requisitions.  <u>Additional Information:</u> Distinguish between the availability of materials and teacher dissatisfaction. Specify concerns and develop corrective action (CA) plans.
Review Type Program/Service 212	IEP	R 340.1701b(g)	Physical Therapy - Evidence that physical therapy services were prescribed by an appropriate medical authority and recommended by the IEP Team.	Verify that a current prescription is on file from a physician and that the physical therapy was recommended on the IEP Team report.  <u>Additional Information:</u> For a prescription to be considered current it cannot be older than twelve (12) months. (MCL 333.17820 Act 368 of 1978 of the Public Health Code, Policy of Medical Practice.)
Review Type Program/Service 213	IEP	34 CFR §300.307(b)	IEP - Evidence that students in a general education facility, not needing specially designed physical education, are afforded the opportunity to participate in the general education physical education program.	Verify that the student was afforded the opportunity to participate in the general education physical education program by checking the IEP Team report and the class schedule.
Review Type Program/Service 214	IEP	34 CFR §300.307(c)	IEP - Evidence that specially designed physical education is being provided as determined by the IEP Team.	If specially designed physical education is authorized by the IEP Team report, verify that it is being provided by checking the student's instructional schedule. Verify that there is at least one (1) annual goal and two (2) STOs related to physical education.  <u>Additional Information:</u> Check the annual goals and the STOs in the IEP Team report, the class schedule, and the instructional plans of the provider.
Review Type Program/Service 215	WSBL	R 340.1733(i)	Worksite-Based Learning - Evidence that a written agreement/plan has been designed by the student, parent, school, and worksite representative.	Verify that there are signatures of the student, parent, school representative, and the worksite representative on the written agreement/plan.

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Review Type Program/Service 216 R 340.1733(i)	WSBL		Worksite-Based Learning - Evidence that a worksite based learning agreement/plan contains the following: job activities, related instruction if applicable, expectations and standards of attainment, time and duration of the program, and wages to be paid, if applicable.	Verify that the written agreement/plan contains and addresses all of the following components: <ul style="list-style-type: none"> <li>- job activities,</li> <li>- related instruction, if applicable,</li> <li>- standards of attainment,</li> <li>- time and duration of the program, and</li> <li>- wages to be paid, if applicable.</li> </ul>
Review Type Program/Service 217 R 340.1733(i)	WSBL		Worksite-Based Learning - Evidence that the visiting worksite representative visited at least every thirty (30) calendar days, checked attendance, evaluated the student's progress, and assessed the placement in terms of health, safety, and welfare of the student.	Verify that the visiting worksite representative visited at least every thirty (30) calendar days and checked the following components: <ul style="list-style-type: none"> <li>- attendance,</li> <li>- the student's progress, and</li> <li>- assess the placement in terms of <ul style="list-style-type: none"> <li>A) health,</li> <li>B) safety, and</li> <li>C) welfare of the student.</li> </ul> </li> </ul> <p><u>Additional Information:</u>  Review the staff schedule and visitation log for documentation of each of the above components.</p>
Review Type Program/Service 300 R 340.1733(j)	Prog. SCI		Aides - Evidence that substitute instructional aides are provided when regular instructional aides are absent.	Verify by interviewing the provider and, if necessary, reviewing the district records to determine that the district obtained substitute instructional aides when the regular instructional aides were absent from programs for students with cognitive impairment(s) (R 340.1738).
Review Type Program/Service 301 R 340.1733(j)	Prog. SXI		Aides - Evidence that substitute instructional aides are provided when regular instructional aides are absent.	Verify by interviewing the provider and, if necessary, reviewing the district records to determine that the district obtained substitute instructional aides when the regular instructional aides were absent from programs for students with severe multiple impairment(s) (R 340.1748).
Review Type Program/Service 302 R 340.1733(j)	Prog. MoCI		Aides - Evidence that substitute instructional aides are provided when regular instructional aides are absent.	Verify by interviewing the provider and, if necessary, reviewing the district records to determine that the district obtained substitute instructional aides when the regular instructional aides were absent from programs for students with moderate cognitive impairment(s) (R 340.1739).
Review Type Program/Service 307 R 340.1738(a)	Prog. SCI		Programs For Students With Severe Cognitive Impairment - Evidence that the staffing ratio consists of at least one (1) teacher and two (2) instructional aides for a maximum of twelve (12) students.	Review the caseload to verify that for a maximum of twelve (12) students in the programs for students with severe cognitive impairment there is a staffing ratio of at least: <ul style="list-style-type: none"> <li>- one (1) teacher and</li> <li>- two (2) instructional aides.</li> </ul> <p><u>Additional Information:</u>  Monitor one of the following standards: #307, #308, or #309.</p> <p>The second (2nd) aide is assigned with the seventh (7th) student.</p>

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Review Type Program/Service 308 R 340.1738(a)		Prog. SCI	Programs For Students With Severe Cognitive Impairment - Evidence that the staffing ratio consists of at least one (1) teacher and three (3) instructional aides for thirteen (13) to fifteen (15) students.	Review the caseload to verify that for thirteen (13) to a maximum of fifteen (15) students in programs for students with severe cognitive impairment, there is a staffing ratio of at least: - one (1) teacher and - three (3) instructional aides.  <u>Additional Information:</u> Monitor one of the following standards: #307, #308, or #309.
Review Type Program/Service 309 R 340.1738(a)		Prog. SCI	Programs For Students With Severe Cognitive Impairment - Evidence that the staffing ratio consists of at least one (1) full-time teacher and one (1) full-time aide.	Review the caseload to verify a minimum staffing ratio in programs for students with severe cognitive impairment of at least: - one (1) teacher and - one (1) instructional aide.  <u>Additional Information:</u> Monitor one of the following standards: #307, #308, or #309.
Review Type Administrative Interview Review 310 R 340.1738(b)		Prog. SCI	Programs For Students With Severe Cognitive Impairment - Evidence that the program consists of a minimum of two hundred thirty (230) days.	Review the school calendar to verify that the programs for students with severe cognitive impairment provides two hundred thirty (230) days of instruction.
Review Type Administrative Interview 311 R 340.1738(b)		Prog. SCI	Programs For Students With Severe Cognitive Impairment - Evidence that the program consists of a minimum of one thousand, one hundred fifty (1,150) clock hours of instruction.	Review the school calendar to verify that the program schedule for the programs for students with severe cognitive impairment consists of one thousand, one hundred fifty (1,150) clock hours of instruction.  <u>Additional Information:</u> Multiply the number of hours and minutes per day by the number of days. The first five (5) days when pupil instruction is not provided because of conditions not within the control of school authorities, such as severe storms, fires, epidemics, or health conditions as defined by the city, county, or state health authorities, shall be counted as days of pupil instruction. Subsequent days shall not be counted as days of pupil instruction.
Review Type Program/Service 312 R 340.1738(c)		Prog. SCI	Programs For Students With Severe Cognitive Impairment - Evidence that the teacher is responsible for the instructional program and coordinates activities of aides and supportive professional personnel.	Verify that the teacher of programs for students with severe cognitive impairment is responsible for the instructional program and coordinates activities of aides and supportive professional personnel by interviewing the teacher and aide and reviewing the daily schedule and lesson plans.
Review Type Program/Service 313 R 340.1738(d)		Prog. SCI	Programs For Students With Severe Cognitive Impairment - Evidence that the activities of instructional aides are under supervision of a special education teacher.	Verify that the activities of instructional aides are under supervision of a special education teacher by interviewing the teacher and aide.

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Review Type Program/Service 314 R 340.1738(d)		Prog. SCI	Programs For Students With Severe Cognitive Impairment - Evidence that the instructional aides assist in the student's daily training schedule.	Verify that the instructional aides assist in the student's daily training schedule by reviewing the daily schedule of the aide and the teacher.
Review Type Program/Service 315 R 340.1738(f)		Prog. SCI	Programs For Students With Severe Cognitive Impairment - Evidence that a registered nurse is reasonably available.	Verify that a nurse is reasonably available by interviewing the teacher and/or the administrator.
Review Type Program/Service 319 R 340.1739(a)		Prog. MoCI	Programs For Students With Moderate Cognitive Impairment - Evidence that the staffing ratio shall consist of one teacher and one aide for a maximum of fifteen (15) students.	Review the daily class schedule and caseload to verify for a maximum of fifteen (15) students in programs for students with moderate cognitive impairment, that there is a staffing ratio of at least: - one (1) teacher and - one (1) teacher aide.
				<u>Additional Information:</u> Monitor one of the following standards: #319 or #320.
Review Type Program/Service 320 R 340.1739(b)		Prog. MoCI	Programs For Students With Moderate Cognitive Impairment - Evidence that the staffing ratio shall consist of one lead teacher with a maximum of three instructional aides for a maximum of thirty (30) students.	Review the daily class schedule, and caseload to verify for a maximum of thirty (30) students in the programs for students with moderate cognitive impairment, that there is a staffing ratio of at least: - one (1) lead teacher - a maximum of three (3) instructional aides.
				<u>Additional Information:</u> Monitor one of the following standards: #319 or #320.
Review Type Program/Service 321 R 340.1739(b)		Prog. MoCI	Programs For Students With Moderate Cognitive Impairment - Evidence that no more than ten (10) students are assigned to each aide.	Review the daily class schedule, and caseload to verify there is a staffing ratio of no more than ten (10) students assigned to each aide in programs for students with moderate cognitive impairment.
Review Type Program/Service 322 R 340.1740(a)		Prog. MiCI	Programs For Students With Mild Cognitive Impairment (elementary) - Evidence that no more than fifteen (15) different students are assigned to a teacher.	Review the caseload to verify there is a staffing ratio of no more than fifteen (15) different students assigned to each teacher in the programs for students with mild cognitive impairment.
Review Type Program/Service 323 R 340.1740(a)		Prog. MiCI	Programs For Students With Mild Cognitive Impairment (elementary) - Evidence that an aide is present in a room with twelve (12) or more students at a time.	Review the daily class schedule to verify an aide is present when there are twelve (12) or more students in the room at one time in elementary programs for students with mild cognitive impairment.
				<u>Additional Information:</u> A substitute is required if the aide is absent. Check the daily class schedule by instructional time unit (period, hour, etc.).

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<b>Std. No.</b>	<b>Std. Type</b>	<b>Rule No.</b>	<b>Standard</b>	<b>Documentation and Verification Criteria</b>
Review Type Program/Service 324 R 340.1740(b)		Prog. MiCI	Programs For Students With Mild Cognitive Impairment (secondary) - Evidence that no more than fifteen (15) students are in the room at one time.	Review the daily class schedule to verify there are no more than fifteen (15) students in the room at one time for secondary programs for students with mild cognitive impairment.  <u>Additional Information:</u> Check the daily class schedule by instructional time unit (period, hour, etc.).
Review Type Program/Service 325 R 340.1740(b)		Prog. MiCI	Programs For Students With Mild Cognitive Impairment (secondary) - Evidence that no more than fifteen (15) different students are assigned to the teacher's caseload.	Review the caseload to verify there are no more than fifteen (15) students on the teacher's caseload in secondary programs for students with mild cognitive impairment.
Review Type Program/Service 326 R 340.1741		Prog. EI	Programs For Students With Emotional Impairment - Evidence that no more than ten (10) students are in the classroom at one time.	Review the daily class schedule, and caseload to verify there are no more than ten (10) students in programs for students with emotional impairment at one time.  <u>Additional Information:</u> Check the daily class schedule by instructional time unit (period, hour etc.).
Review Type Program/Service 327 R 340.1741		Prog. EI	Programs For Students With Emotional Impairment - Evidence that no more than fifteen (15) different students are assigned to the teacher's caseload.	Review the caseload to verify there are no more than fifteen (15) students on the teacher's caseload in the programs for students with emotional impairment at one time.
Review Type Program/Service 328 R 340.1742(a)		Prog. HI	Programs For Students With Hearing Impairment - Evidence that no more than seven (7) students are assigned to the HI class.	Review the caseload to verify there are no more than seven (7) students assigned to the class in programs for students with hearing impairment.
Review Type Program/Service 329 R 340.1742(b)		Prog. HI	Programs For Students With Hearing Impairment - Evidence that group amplification devices are provided when deemed necessary by the IEP Team.	If the IEP Team report determined that group amplification was necessary, verify that the group amplification devices were provided in programs for students with hearing impairment.  <u>Additional Information:</u> Check the IEP Team report, interview the teacher, and verify the presence of the group amplification devices.
Review Type Program/Service 330 R 340.1742(b)		Prog. HI	Programs For Students With Hearing Impairment - Evidence that the agency ensures amplification devices are functioning properly.	If the IEP Team report determined that group amplification devices were necessary, verify that the group amplification devices are working properly, by interviewing the teacher.



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Review Type Program/Service 332 R 340.1743	Prog. VI		Programs For Students With Visual Impairment - Evidence of not more than the equivalent of eight (8) full-time students.	Review the caseload of the teacher to verify that there are no more than the equivalent of eight (8) FTE in programs for students with visual impairment.  <u>Additional Information:</u> Compute the FTE by listing: - Class schedules, - IEP's, and/or - Current student accounting data.
Review Type Program/Service 333 R 340.1743	Prog. VI		Programs For Students With Visual Impairment - Evidence that the teacher is responsible for the educational programming of no more than ten (10) different students.	Review the caseload to verify that there are no more than ten (10) different students on the teacher's caseload in programs for students with visual impairment.
Review Type Program/Service 335 R 340.1743	Prog. VI		Programs For Students With Visual Impairment - Evidence that low vision aids (excluding prescription eye glasses) are available and functioning properly.	Verify that the low vision aids are available and functioning, if the IEP Team report determined that they were necessary, by interviewing the teacher.
Review Type Program/Service 336 R 340.1744(1)	Prog. PI/OHI		Programs For Students With Physical Impairment or Other Health Impairment - Evidence that no more than ten (10) students are in the classroom at one time.	Review the daily class schedule to verify there are no more than ten (10) different students in the programs for students with physical impairment or other health impairment at one time.  <u>Additional Information:</u> Check the daily class schedule by instructional time unit (period, hour, etc.).
Review Type Program/Service 337 R 340.1744(1)	Prog. PI/OHI		Programs For Students With Physical Impairment or Other Health Impairment - Evidence that the teacher is responsible for not more than fifteen (15) different students.	Review the caseload to verify that there are no more than fifteen (15) different students on the teacher's caseload in programs for students with physical impairment or other health impairment.
Review Type Program/Service 339 R 340.1744(2)	Prog. PI/OHI		Programs For Students With Physical Impairment or Other Health Impairment - Evidence that there is sixty (60) square feet of floor space per person.	Verify that there is at least sixty (60) square feet of floor space per student in the programs for students with physical impairment or other health impairment by obtaining the measurements of the room and calculating the square footage per person.  <u>Additional Information:</u> Calculate the square footage and divide by the number of students.
Review Type Program/Services 342 R 340.1745(a)	Ser. SLI		Services For Students With Speech and Language Impairment - Evidence that the speech and language services are based on individual needs.	Verify that the speech and language therapy activities used with the child are aligned with the IEP Team goals and STOs by reviewing the IEP Team report and the diagnostic report.  <u>Additional Information:</u> Consider items such as: - Lesson plans, - Therapy logs, and - Medicaid records.

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Review Type Program/Service 343 R 340.1745(a)	Ser. SLI		Services For Students With Speech and Language Impairment - Evidence of a diagnostic report by an authorized provider of speech and language services.	Review student records to verify that there is a diagnostic report prior to the IEP Team meeting in which speech and language service is initiated.  <u>Additional Information:</u> Unless this report is part of the MET to establish eligibility under R 340.1710 (SLI), this report does not need to meet the full SLI eligibility rule.
Review Type Program/Service 344 R 340.1745(b)	Ser. SLI		Services For Students With Speech and Language Impairment - Evidence of cooperative planning in determining the caseload size.	Verify that there was cooperative planning in determining caseload size by interviewing the TSLI, principal, and/or special education administrator.  <u>Additional Information:</u> Specify the concerns expressed in the interviews to assist in developing a corrective action plan.
Review Type Program/Service 345 R 340.1745(b)(i)-(v)	Ser. SLI		Services For Students With Speech and Language Impairment - Evidence that the caseload size was based upon the severity and multiplicity of the disabilities with adequate time allowed for the following: diagnostics, report writing, consulting with parents and teachers, attendance at IEP Team meetings, and travel.	Interview the authorized provider, special education administrator, and/or principal to verify that when establishing the caseload of the authorized provider, consideration was given to the time required to provide the IEP team recommended services and for the following components: <ul style="list-style-type: none"> <li>- diagnostics,</li> <li>- report writing,</li> <li>- consulting with parents and teachers,</li> <li>- attendance at IEP Team meetings, and</li> <li>- travel.</li> </ul> <u>Additional Information:</u> Interview the teacher and review the teacher's schedule to obtain the information.
Review Type Program/Service 346 R 340.1745(c)	Ser. SLI		Services For Students With Speech and Language Impairment - Evidence exists that the caseload does not exceed more than sixty (60) students and that students being evaluated are counted as part of the caseload.	Verify that the caseload does not exceed sixty (60) students, including those students being initially evaluated for speech and language service by checking the caseload of the teacher and the list of students being initially evaluated.
Review Type Program/Service 347 R 340.1746(a)	H/H Ser		Homebound Services - Evidence that services were initiated within fifteen (15) days of verification of licensed physician.	Review the date of the physician's signature and the date on which service was initiated to verify that an IEP Team meeting was held and that services were initiated within fifteen (15) days for students receiving homebound programs.  Check the date of the district's receipt of verification by a licensed physician and the date on which the service was initiated.
Review Type Program/Service 348 R 340.1746(b)	H/H Ser		Hospitalized Services - Evidence that services were provided to hospitalized students.	Review the instructional records and logs of the hospitalized service provider to verify that services were provided to the hospitalized student.

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Review Type Program/Service 349 R 340.1746(c)	H/H Ser		Homebound/Hospitalized Services - Evidence that there are not more than twelve (12) students on the teacher's caseload at one time.	Review the caseload to verify that the number of students on the caseload does not exceed twelve (12) at one time.
Review Type Program/Service 350 R 340.1746(d)	H/H Ser		Homebound/Hospitalized Services - Evidence of progress reports pursuant to ISD plan.	Verify that progress reports were recorded pursuant to the ISD plan.  <u>Additional Information:</u> Compare the progress reports to the ISD plan requirements.
Review Type Program/Service 351 R 340.1746(e)	H/H Ser		Homebound/Hospitalized Services - Evidence that a teacher provides a minimum of two (2) nonconsecutive hours of instruction per week.	Verify that the teacher provided a minimum of two (2) nonconsecutive hours of instruction per week by reviewing the provider's contact schedule and log.  <u>Additional Information:</u> Related services personnel may supplement, but not substitute for the teacher's instruction.
Review Type Program/Service 352 R 340.1746(g)	H/H Ser		Homebound/Hospitalized Services - Evidence that homebound/hospitalized services do not substitute for special education programs and that, to the extent appropriate, curriculum experiences are provided from the program where the student is enrolled.	Review the student's goals and objectives developed by the IEP Team and the district's curriculum to verify the standard.
Review Type Program/Service 400 R 340.1747	Prog. SLD		Programs For Students With Specific Learning Disabilities - Evidence that no more than ten (10) students are in the classroom at the same time.	Review the daily class schedule to verify there are no more than ten (10) students in programs for students with specific learning disabilities at the same time.
Review Type Program/Service 401 R 340.1747	Prog. SLD		Programs For Students With Specific Learning Disabilities - Evidence that the teacher shall be responsible for the educational programming of no more than fifteen (15) students.	Review caseload to verify that there are no more than fifteen (15) students on the teacher's caseload for programs for students with specific learning disabilities.  <u>Additional Information:</u> Even in a departmentalized program, the teacher may have no more than fifteen (15) students on a caseload.
Review Type Program/Service 402 R 340.1748(1)	Prog. SXI		Programs For Students With Severe Multiple Disabilities - Evidence that the staff ratio consists of one (1) teacher and two (2) instructional aides for a maximum of nine (9) students.	Review the caseload to verify for a maximum of nine (9) students in programs for students with severe multiple disabilities, that there is a staffing ratio of at least: - one (1) teacher and - two (2) instructional aides.
Review Type Program/Service 403 R 340.1748(1)	Prog. SXI		Programs For Students With Severe Multiple Disabilities - Evidence of at least one (1) full-time teacher and one (1) full-time aide.	Review the personnel assignment to verify there is at least one (1) full time teacher and one (1) full time aide in programs for students with severe multiple disabilities.

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Review Type Administrative Interview 404 R 340.1748(2)		Prog. SXI	Programs For Students With Severe Multiple Disabilities - Evidence that the program consists of a minimum of two hundred thirty (230) days of instruction.	<p>Review the school calendar to verify that programs for students with severe multiple disabilities consists of two hundred thirty (230) days of instruction.</p> <p><u>Additional Information:</u> Verify the number of total days by checking the school calendar.</p> <p>The first five (5) days when pupil instruction is not provided because of conditions not within the control of school authorities, such as storms, fires, epidemics or health conditions, shall be counted as days of pupil instruction.</p>
Review Type Administrative Interview 405 R 340.1748(2)		Prog. SXI	Programs For Students With Severe Multiple Disabilities - Evidence that the program consists of a minimum of one thousand, one hundred fifty (1,150) clock hours of instruction.	<p>Review the daily class schedule and the school calendar to verify that programs for students with severe multiple disabilities consists of a minimum of one thousand, one hundred fifty (1,150) clock hours of instruction.</p> <p><u>Additional Information:</u> Multiply the number of hours and minutes per day by the number of days and check the daily class schedule and the number of total days by checking the school calendar.</p> <p>The first five (5) days when pupil instruction is not provided because of conditions not within the control of school authorities, such as severe storms, fires, epidemics, or health conditions as defined by the city, county, or state health authorities, shall be counted as days of pupil instruction. Subsequent days shall not be counted as days of pupil instruction.</p>
Review Type Program/Service 406 R 340.1748(3)		Prog. SXI	Programs For Students With Severe Multiple Disabilities - Evidence that a registered nurse is reasonably available.	<p>Verify that a nurse is reasonably available by interviewing the teacher or administrator.</p>
Review Type Program/Service 413 R 340.1749(1)(a-d)		TC	Teacher Consultant - Evidence that the TC does one or more of the following: provides instructional support to general/special education teachers, provides student instruction, provides consultation to educational personnel, or acts as MET member.	<p>Interview the teacher consultant and review his or her schedule to verify that one or more of the following service(s) is/are provided:</p> <ul style="list-style-type: none"> <li>- instructional support to regular/special education teachers,</li> <li>- student instruction,</li> <li>- consultation to educational personnel, or</li> <li>- acts as MET member.</li> </ul>

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Review Type Program/Service 414	TC	R 340.1749(1)(a)(b)	Teacher Consultant - Evidence that the teacher consultant does not give grades, credit, or teach general or special education classes or course.	<p>Interview the teacher consultant and review the daily schedule calendar to verify that the teacher consultant does not give grades, credit, or teach general or special education classes.</p> <p><u>Additional Information:</u>  Teacher consultants may provide a supportive service to general education, provided the student receiving teacher consultant services remains in the general education curriculum and meets the general education goals for that curriculum.</p> <p>The teacher consultant may provide consultation to education personnel on behalf of students with disabilities on the consultant's caseload.</p> <p>If a student receives teacher consultant service only, annual goals and STOs must be written for the service.</p>
Review Type Program/Service 415	TC	R 340.1749(2)	Teacher Consultant - Evidence that the student caseload does not exceed twenty-five (25) students.	<p>Review the caseload to verify that there are no more than twenty-five (25) students on the caseload of the teacher consultant.</p> <p><u>Additional Information:</u>  Caseload for a teacher consultant providing diagnostic service must include all students currently under evaluation.</p> <p>Teacher consultant services to resource room teachers under R 340.1749a(5) and R 340.1749b(4) are not counted as part of the caseload.</p>
Review Type Program/Service 416	TC	R 340.1749(2)(a-e)	Teacher Consultant - Evidence that in establishing the caseload, consideration was given to the time required for all of the following: instructional services, evaluation, consultation, report writing, and travel.	<p>Interview the teacher consultant and/or special education administrator to verify that when establishing the caseload of the teacher consultant, consideration was given to the time required for the following components:</p> <ul style="list-style-type: none"> <li>- instructional services,</li> <li>- evaluation,</li> <li>- consultation,</li> <li>- report writing, and</li> <li>- travel.</li> </ul>
Review Type Program/Service 417	TC	R 340.1749(3)	Teacher Consultant - Evidence that the TC does not serve in a supervisory or administrative role.	<p>Review the daily schedule and job description and interview the teacher consultant to verify that the provider is not serving in a supervisory or administrative capacity in the school district.</p>
Review Type Credential 418	ERP	R 340.1749a(1)	Elementary Resource Program - Evidence that the provider is a special education teacher.	<p>Review the teaching certificate(s) to verify that the elementary provider is a special education teacher.</p>
Review Type Program/Service 421	ERP	R 340.1749a(2)	Elementary Resource Program - Evidence that no more than ten (10) students are in the classroom at one time.	<p>Review the daily class schedule of the teacher to verify that there are no more than ten (10) students in the elementary resource program at one time.</p>

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Review Type Program/Service 422 R 340.1749a(2)	ERP		Elementary Resource Program - Evidence of a caseload of not more than eighteen (18) different students.	Review the caseload to verify that there are no more than eighteen (18) different students on the caseload of the elementary resource program teacher.
Review Type Program/Service 423 R 340.1749a(2)(a)(b)	ERP		Elementary Resource Program - Evidence that the resource room teacher does either or both of the following: provides direct instruction or provides support to the student's general education classroom teacher(s).	Review the daily class schedule and interview the teacher to verify that the elementary resource program teacher provides either or both of the following: - direct instruction, or - support to the student's general education teacher(s) to whom special education students on the resource teacher's caseload have been assigned.
Review Type Program/Service 424 R 340.1749a(2)(b)	ERP		Elementary Resource Program - Evidence that time has been allocated to the resource teacher to provide support to general education classroom teachers.	Review the teacher's daily schedule and interview the teachers to verify that time has been allocated to the resource program teacher to provide support to the general education teacher to whom special education students on the elementary resource program teacher's caseload have been assigned.
Review Type Program/Service 425 R 340.1749a(4)	ERP		Elementary Resource Program - Evidence that the elementary resource teacher does not evaluate students in a building other than the building to which assigned.	Interview the provider to verify that the elementary resource teacher evaluates students only in the same school building in which his or her elementary resource program is based.
Review Type Program/Service 426 R 340.1749(a)(4)	ERP		Elementary Resource Program - Evidence exists that the elementary resource teacher is not responsible for evaluating more than two (2) students during the same time period.	Interview the teacher and/or administrator to verify that the elementary resource teacher is responsible for the evaluation of no more than two (2) students concurrently.
Review Type Program/Service 427 R 340.1749(a)(4)	ERP		Elementary Resource Program - Evidence that time is allocated to the teacher for evaluating students.	If the resource teacher evaluates general education students suspected of having a disability, interview this teacher. Verify that the elementary resource teacher is allocated time for the evaluation of students.
Review Type Program/Service 428 R 340.1749(a)(5)	ERP		Elementary Resource Program - Evidence that the IEP Team considered the need for a TC to be assigned to the resource program teacher when his or her endorsement does not match the student's disability.	Review the IEP Team report to verify that the need for the assignment of a teacher consultant to the elementary resource program teacher was considered when the endorsement of the elementary resource program teacher does not match the disability of the student.
Review Type Credential 429 R 340.1749b(1)	SRP		Secondary Resource Program - Evidence that the provider is a special education teacher.	Review the teaching certificate(s) to verify that the secondary resource program provider is a special education teacher.
Review Type Program/Service 432 R 340.1749b(2)	SRP		Secondary Resource Program - Evidence of no more than ten (10) students in the classroom at one time.	Review the teacher's daily class list per instructional period/hour to verify that there are no more than ten (10) students in the secondary resource program at one time.

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Review Type Program/Service 433 R 340.1749b(2)	SRP		Secondary Resource Program - Evidence of a caseload of no more than twenty (20) different students.	Review the teacher's caseload to verify that there are not more than twenty (20) different students on the caseload of the secondary resource program teacher.
Review Type Program/Service 434 R 340.1749b(2)(a-b)	SRP		Secondary Resource Program - Evidence that the resource room teacher does either or both of the following: provides direct instruction or provides support to the student's general education teacher.	Interview the teacher and review the teacher's daily class schedule to verify that the secondary resource program teacher provides either or both of the following: - direct instruction for special education courses approved for graduation by the LEA, and/or - support to the student's general education teacher(s).
Review Type Program/Service 435 R 340.1749b(2)(b)	SRP		Secondary Resource Program - Evidence that time has been allocated to the resource room teacher to provide support to general education classroom teachers.	Review the teacher's daily schedule and interview the teacher to verify that time has been allocated to the resource program teacher to provide support to the general education classroom teacher to whom special education students on the resource program teacher's caseload have been assigned.
Review Type Program/Service 436 R 340.1749b(3)	SRP		Secondary Resource Program - Evidence that the resource teacher does not teach a class and offer tutorial assistance at the same time.	Review the class schedule and interview the teacher to verify the secondary resource program teacher does not teach and tutor at the same time.
Review Type Program/Service 437 R 340.1749(b)(4)	SRP		Secondary Resource Program - Evidence that the IEP Team considered the need for a TC to be assigned to the resource teacher when his/her endorsement does not match the student's disability.	Review the IEP Team report to verify that the need for the assignment of a teacher consultant to the secondary resource program teacher was considered when the endorsement of the secondary resource program teacher does not match the disability of the student.
Review Type Program/Service 438 R 340.1749c(2)	Dept.		Departmentalization - Evidence that the teacher does not teach more than one local educational agency (LEA) approved special education course per period.	Review the schedule of the teacher and the LEA approved course list to verify that the teacher does not teach more than one LEA approved special education course per period.
Review Type Program/Service 439 R 340.1749c(3)	Dept.		Departmentalization - Evidence that the total number of students served does not exceed the combined caseloads of the participating teachers.	Review the caseloads of each teacher participating in the departmentalized program or subgroup (teachers that share a specific group of students) to verify that the total number of students served does not exceed the combined caseloads of the participating teachers.

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Review Type Program/Service 440 R 340.1749c(4)	Dept.		Departmentalization - Evidence that the teacher does not serve more than an average of ten (10) students per class period per instructional day.	<p>Review the class list per period of each teacher in the departmentalized program or subgroup (teachers that share a specific group of students) of a departmentalized program to verify that no teacher has more than an average of ten (10) students per period.</p> <p><u>Additional Information:</u>  Add the number of students seen per hour and divide the total by the number of class periods.</p> <p>When monitoring a departmentalized program for students on a block schedule more than one day/week may need to be considered in computing the average of ten (10) students per hour.</p> <p>Teacher planning periods may not be included in the calculation.</p>
Review Type Credential 441 R 340.1754(a)	EC SP ED Prog.		Early Childhood Special Education Programs - Evidence that an approved early childhood education teacher be provided to young children with disabilities or developmental delay, two and one-half (2-1/2) through five (5) years of age, based upon the child's individual needs as specified by the IEP Team.	<p>Review the teaching certificate(s) to verify the special education approval endorsement of the teacher of the early childhood special education program.</p>
Review Type Program/Service 441a R 340.1754(a)	EC SP ED Prog.		Early Childhood Special Education Programs - Evidence that an early childhood special education program provides services to young children with disabilities or developmental delay, two and one-half through five years of age.	<p>Review the birth dates of students enrolled in the early childhood special education program to determine if the age range is from two and a half (2 1/2) through five (5) years of age.</p> <p><u>Additional Information:</u>  Early childhood special education programs may include students under two and a half (2 1/2) years of age as specified by the individualized education program team.</p>
Review Type Administrative Interview 442 R 340.1754(b)	EC SP ED Prog.		Early Childhood Special Education Programs - Evidence of a minimum of three hundred sixty (360) clock hours of instruction.	<p>Check the daily class schedule and the school calendar to verify that the early childhood special education programs provide three hundred sixty (360) clock hours of instruction.</p> <p><u>Additional Information:</u>  Check the daily class schedule to determine the number of hours per day, and the school calendar to determine the days of instruction.</p> <p>Multiply the number of hours and minutes per day by the number of days in the school year.</p>



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<b>Std. No.</b>	<b>Std. Type</b>	<b>Rule No.</b>	<b>Standard</b>	<b>Documentation and Verification Criteria</b>
Review Type Policy Procedures Review 442a R 340.1754(b)	EC SP ED Prog.		Early Childhood Special Education Programs - Evidence that when a preschool aged child with a disability or developmental delay is placed in a nonspecial education program, that the IEP Team considered the need for consultation by an early childhood special education teacher.	Verify that the IEP Team considered the need for consultation by an early childhood special education teacher if a preschool aged child with a disability or developmental delay was placed in a nonspecial education program.
Review Type Administrative Interview 443 R 340.1754(b)	EC SP ED Prog.		Early Childhood Special Education Programs - Evidence of a minimum of one hundred forty-four (144) days of instruction.	Interview the provider and check the school calendar to verify that the early childhood special education program provides one hundred forty-four (144) days of instruction.
Review Type Program/Service 444 R 340.1754(c)	EC SP ED Prog.		Early Childhood Special Education Programs - Evidence of no more than twelve (12) students for one teacher and one aide at any one time.	Review the daily class schedule to verify, for a maximum of twelve (12) students in the early childhood special education program, that there is a staffing ratio of at least: <ul style="list-style-type: none"> <li>- one (1) teacher and</li> <li>- one (1) aide.</li> </ul> <p><u>Additional Information:</u> Check the daily class schedule by instructional time unit (period, hour, etc.).</p>
Review Type Program/Service 445 R 340.1754(c)	EC SP ED Prog.		Early Childhood Special Education Programs - Evidence of not more than twenty-four (24) different students on the caseload.	Review the caseload to verify that there are no more than twenty-four (24) different students on the teacher's caseload in an early childhood special education program.
Review Type Program/Service 446 R 340.1754(d)	EC SP ED Prog.		Early Childhood Special Education Programs - Evidence that the program has parent participation and education components.	Interview the teacher to verify that the Early Childhood Special Education Program has the following components: <ul style="list-style-type: none"> <li>- parent participation, and</li> <li>- education.</li> </ul> <p><u>Additional Information:</u> Identify specific activities, times, and dates.</p>
Review Type Credential 447 R 340.1755(a)	EC SP ED SER		Early Childhood Special Education Services - Evidence that services are provided by an approved early childhood special education teacher or approved related services' staff.	Review the the certificates/licensures of providers to verify that early childhood special education services are provided by an approved early childhood special education teacher or an approved related services' staff person. <p><u>Additional Information:</u> The services could be provided by an occupational therapist, physical therapist.</p>

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Review Type Program/Service 448	EC SP ED SER	R 340.1755(a)	Early Childhood Special Education Services - Evidence that early childhood special education services are provided to students birth through five (5) years of age as determined by the IEP Team report or the combined individualized education/family service plan, as appropriate.	Check the birth dates of the students on the class list to verify that the early childhood special education services determined by the IEP Team report or the combined individualized education/family service plan, as appropriate, are provided to students birth through five (5) years of age.  <u>Additional Information:</u> Upon the sixth (6th) birthday, the child is no longer eligible for early childhood special education services. If the student is less than six years of age on the fourth (4th) Wednesday of September, the student may complete the school year with early childhood special education services.
Review Type Program/Service 449	EC SP ED SER	R 340.1755(a)	Early Childhood Special Education Services - Evidence that approved related services' staff are working under the supervision of an approved early childhood special education teacher.	Interview the teacher to verify that the approved related services' staff are working under the supervision of an approved early childhood special education teacher.
Review Type Program/Service 450	EC SP ED SER	R 340.1755(b)	Early Childhood Special Education Services - Evidence that early childhood special education services are provided for a minimum of two (2) hours per week.	Review the IEP Team report and check the weekly schedule to verify that the students are provided a minimum of two (2) hours of services per week.
Review Type Administrative Interview 451	EC SP ED SER	R 340.1755(b)	Early Childhood Special Education Services - Evidence that services are provided not less than seventy-two (72) hours within one hundred eighty (180) school days.	Review the schedule and the calendar to verify that the early childhood special education services are provided for at least seventy-two (72) hours within the one hundred eighty (180) school days. Services may be provided in appropriate early childhood community or family settings.
Review Type Program/Service 453	EC SP ED SER	R 340.1755(c)	Early Childhood Special Education Services - Evidence that the service has parent participation and education components.	Interview the teacher to verify that the early childhood special education service has the following components: - parent participation, and - education.  <u>Additional Information:</u> Identify specific activities, times, and dates.
Review Type Program/Service 454	Prog. SLI	R 340.1756(1)(a)	Programs For Students With Severe Language Impairment - Evidence that the programs for students with severe language impairment serve only young children with disabilities or developmental delay or elementary students with severe language impairment.	Review the class list (which includes the grade level and birth date of each student) IEP'S and diagnostic reports to verify that the programs for students with severe language impairment include only students with severe language impairment who are young children with disabilities or developmental delay or elementary students with severe language impairment.
Review Type Program/Service 455	Prog. SLI	R 340.1756(1)(b)	Programs For Students With Severe Language Impairment - Evidence of no more than ten (10) students in the classroom at any one time.	Review the daily class schedule to verify that there are no more than ten (10) students in the programs for students with severe language impairment at any one time.

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Review Type Program/Service 456 R 340.1756(1)(b)		Prog. SLI	Programs For Students With Severe Language Impairment - Evidence of no more than fifteen (15) different students on the caseload.	Review the caseload to verify that programs for students with severe language impairment does not exceed fifteen (15) students.
Review Type Program/Service 457 R 340.1756(2)		Prog. SLI	Eligibility For Programs For Students With Severe Language Impairment - Evidence of a severe disability in the comprehension or expression of language which adversely affects educational performance.	Review the MET Report to verify that a severe disability in the comprehension or expression of language, which adversely affects educational performance, was specifically established in determining eligibility for programs for students with severe language impairment.
Review Type Program/Service 458 R 340.1756(2)(a)		Prog. SLI	Eligibility For Programs For Students With Severe Language Impairment - Evidence of functioning within or above normal intellectual potential on instruments that do not rely exclusively on oral direction/expression.	Review the MET Report to verify that in determining eligibility for programs for students with severe language impairment, an intellectual assessment instrument was used that does not rely exclusively on oral direction/expression.  <u>Additional Information:</u> Look for documentation of assessment used and verify that intellectual functioning was within or above the normal range.
Review Type Program/Service 459 R 340.1756(2)(b)		Prog. SLI	Eligibility For Programs For Students With Severe Language Impairment - Evidence of test results to determine language functioning [not less than two standardized assessment instruments or two (2) sub tests] not appropriate for the student's mental age.	Review the MET Report to verify that in determining eligibility for programs for students with severe language impairment not less than two standardized assessment instruments [or two (2) subtests] were used in establishing that language functioning was not appropriate for the student's mental age.  <u>Additional Information:</u> Look for documentation of the assessments used.
Review Type Program/Service 460 R 340.1756(2)(c)(i-v)		Prog. SLI	Eligibility For Programs For Students With Severe Language Impairment - Evidence of oral language at less than expected level for the mental age of the student or young child in not less than two of the following areas: phonology, morphology, syntax, semantics, and/or pragmatics.	Review the MET report to verify that in determining eligibility for programs for students with severe language impairment, oral language is less than expected for the mental age of the student or young child in not less than two of the following areas: <ul style="list-style-type: none"> <li>- phonology,</li> <li>- morphology,</li> <li>- syntax,</li> <li>- semantics, and/or</li> <li>- pragmatics.</li> </ul> <u>Additional Information:</u> In reports, phonology may also be referred to as articulation, articulatory abilities, or sound production.

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Review Type Program/Service 463 R 340.1756(3)	Prog. SLI		Eligibility For Programs For Students With Severe Language Impairment - Evidence that the language impairment is not primarily the result of: autism, or cognitive, visual, physical, other health impairments, emotional, hearing impairments, or physical or other health impairments.	Review the MET report to verify that the severe language impairment is not the result of the following: <ul style="list-style-type: none"> <li>- autism,</li> <li>- cognitive impairment,</li> <li>- visual impairment,</li> <li>- physical impairment,</li> <li>- other health impairments,</li> <li>- emotional impairment, or</li> <li>- hearing impairment.</li> </ul>
Review Type Program/Service 464 R 340.1757(a)	JD		JD Facility - Evidence that programs were initiated within five (5) calendar days after admission.	Review the JD facility admission record or the school enrollment record to verify that the program in the juvenile detention facility was initiated within five (5) calendar days after admission.
Review Type Program/Service 465 R 340.1757(a)	JD		JD Facility - Evidence of an evaluation for eligibility, assignment, and due process procedures if a person is suspected of having a disability.	Review the MET and IEP Team report to verify for the student suspected of having a disability and assigned to a juvenile detention facility program, that there is evidence of the following: <ul style="list-style-type: none"> <li>- an evaluation for eligibility,</li> <li>- assignment procedures, and</li> <li>- due process procedures.</li> </ul>
Review Type Program/Service 466 R 340.1757(b)	JD		JD Facility - Evidence that notification of educational placement was sent to the superintendent of the district of residence within five (5) school days after the date of entry of the student into the educational program in a juvenile detention facility.	Verify that the resident district superintendent was notified within five (5) school days after the date of entry of a student suspected of having a disability into an educational program in a juvenile detention facility.
Review Type Program/Service 467 R 340.1757(c)	JD		JD Facility - Evidence that educational reports were sent to the superintendent of the resident district within five (5) days of release from the facility.	Compare the date of the release to the date of the written release notice, to verify that educational reports were sent and that the resident district superintendent was notified within five (5) school days of the student's release from a juvenile detention facility program.
Review Type Program/Service 468 R 340.1757(c)	JD		JD Facility - Evidence of parental consent to send educational reports to the superintendent of the resident district.	Verify that the parental consent was given to send the educational reports to the superintendent of the resident district for the student suspected of having disability, who was in a juvenile detention facility program.
Review Type Program/Service 469 R 340.1757(d)(ii)	JD		JD Facility - Evidence of no more than ten (10) students in a classroom at any one time.	Review the daily class schedule to verify that the juvenile detention facility classroom program has a maximum of ten (10) students at any one time. Students who do not have disabilities and who are placed in the facility may be enrolled in the program. They are included in the ten (10) student maximum class size.

**Additional Information:**

Check the daily class schedule by instructional time unit (period, hour, etc.).

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Review Type Program/Service 470 R 340.1758(1)(a)	AI		Programs For Students With Autism - Evidence of not more than five (5) students assigned to a teacher in a program with one classroom, or evidence that the average staffing ratio does not exceed five (5) students to one teacher and one aide if the program contains more than one classroom.	Review the class list, the number of classrooms and the assignments of the aide to verify that the programs for students with autism has one of the following: <ul style="list-style-type: none"> <li>- not more than five (5) students assigned to a teacher in a program with one classroom, or</li> <li>- the average staffing ratio does not exceed five (5) students to one teacher and one aide if the program contains more than one classroom.</li> </ul>
Review Type Program/Service 471 R 340.1758(1)(a)	AI		Programs For Students With Autism - Evidence that a classroom with three (3) or more students has an aide.	Review the daily class schedule and the aide assignment to verify that there is an aide for programs for students with autism when there are three (3) or more students.
Review Type File 600 34 CFR §300.533(a)	EVAL		Evaluation Review - Evidence that the Evaluation Review consisted of the following participants: parents, regular education teacher (if the student is or may be participating in regular education), special education teacher/provider, public agency representative, individual(s) who can interpret evaluation results, other qualified individual(s) as appropriate, student if appropriate.	The Evaluation Review consisted of the following participants: <ul style="list-style-type: none"> <li>- parents,</li> <li>- regular education teacher (if the student is or may be participating in regular education),</li> <li>- special education teacher/provider,</li> <li>- public agency representative,</li> <li>- individual(s) who can interpret evaluation results,</li> <li>- other qualified individual(s), as appropriate, and</li> <li>- student if appropriate.</li> </ul>
Review Type File 601 34 CFR §300.533(a)(1)(i)	EVAL		Evaluation Review - Evidence that existing evaluation and information data provided by the parents of the child were reviewed.	Examine that existing information and evaluations provided by the parents of the child were reviewed and documented on the evaluation review form. [34 CFR §300.502(c)(1)]
Review Type File Review 602 34 CFR §300.533(a)(1)(ii)	EVAL		Evaluation Review - Evidence that existing data on the student were reviewed.	Examine the Evaluation Review form to verify that existing data regarding the student were reviewed.  <u>Additional Information:</u> Evaluation data reviewed may include, but are not limited to, the following: <ul style="list-style-type: none"> <li>- the student's educational record,</li> <li>- behavior assessment data, or</li> <li>- discipline records.</li> </ul>
Review Type File Review 603 34 CFR §300.533(a)(1)(ii)	EVAL		Evaluation Review - Evidence that current classroom-based assessments and observations of the student were reviewed.	Examine the Evaluation Review form to verify that current classroom-based assessments and observations of the student were reviewed.  <u>Additional Information:</u> The final idea regulations requires a review of the information. A written description is optional.

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Review Type File Review 604 34 CFR §300.533(a)(1)(iii)	EVAL		Evaluation Review - Evidence that observations by teachers and service providers of the student were reviewed.	Examine the Evaluation Review form to verify that observations by teachers and service providers of the student were reviewed.  <u>Additional Information:</u> The final idea regulations requires a review of the information. A written description is optional.
Review Type File Review 605a 34 CFR §300.533(a)(2)(i)	EVAL		Evaluation Review - Evidence that, on the basis of the review of existing evaluation data and input from the parents, the Evaluation Review documented, that there was a determination of the additional data needed to determine if the student has a disability, or in the case of reevaluation, whether the student continues to have a disability.	Verify that on the basis of the review of existing evaluation data and input from the parents, the evaluation review documented that there is a description of the additional data needed to determine: <ul style="list-style-type: none"> <li>- if the student has a disability, or</li> <li>- in the case of reevaluation, whether the student continues to have a disability.</li> </ul> <u>Additional Information:</u> Current MET procedures [including the requirement cited at 34 CFR §300.534(b)(1)] must be followed for all initial evaluations for special education eligibility.  If no additional data are needed in the evaluation review, the form should indicate "None."  A local educational agency shall evaluate a student with a disability before determining that the student is no longer a student with a disability.  However, an Evaluation Review is not required before termination of a student's eligibility due to graduation with a regular high school diploma or attaining age 26.
Review Type File Review 605b 34 CFR §300.533(a)(2)(ii)	EVAL		Evaluation Review - Evidence that, on the basis of the review of existing evaluation data and input from the parents, the Evaluation Review documented that there was a determination of the additional data needed to determine the present levels of educational performance, and educational needs of the student.	Verify that, on the basis of the review of existing evaluation data and input from the parents, the Evaluation Review documented that there is there is a description of the additional data needed to determine the present levels of educational performance and the educational needs of the student.  <u>Additional Information:</u> If no additional data are needed, the form should indicate "None."

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Review Type File Review 605c 34 CFR §300.533(a)(2)(iii)	EVAL		Evaluation Review - Evidence that, on the basis of the review of existing evaluation data and input from the parents, the Evaluation Review documented that there was a determination of the additional data needed to determine if the student needs special education and/or related services, or in the case of reevaluation, if the student continues to need special education and/or related services.	<p>Verify that, on the basis of the review of existing evaluation data and input from the parents, the Evaluation Review documented there is a description of the additional data needed to determine :</p> <ul style="list-style-type: none"> <li>- if the student needs special education and/or related services, or</li> <li>- in the case of reevaluation, if the student continues to need special education and/or related services.</li> </ul> <p><u>Additional Information:</u> If no additional data are needed, the form should indicate "None."</p>
Review Type File Review 605d 34 CFR §300.533(a)(2)(iv)	EVAL		Evaluation Review - Evidence that on the basis of the review of existing evaluation data and input from the parents, the Evaluation Review documented there was a determination of the additional data needed to determine whether any additions or modifications to the special education and related services are needed to enable the student to meet the measurable annual goals set out in the IEP for the student to participate, as appropriate, in the general curriculum.	<p>Verify that, on the basis of the review of existing evaluation data and input from the parents, the Evaluation Review documented a description of the additional data needed to determine whether any additions or modifications to the special education and related services are needed to enable the student to:</p> <ul style="list-style-type: none"> <li>- meet measurable annual goals set out in the IEP of the student, and</li> <li>- to participate, as appropriate, in the general curriculum.</li> </ul> <p><u>Additional Information:</u> Before the initial IEP, the student will not have annual goals. Therefore, before the initial IEP, this statement may be interpreted to mean that additional evaluation is required to determine if special education and related services are necessary for the student to benefit from the general curriculum.</p> <p>Evaluations may include, but are not limited to, functional behavior assessments, academic assessments, or assessments related to assistive technology.</p> <p>If no additional data are needed, the form should indicate "None."</p>
Review Type File Review 605e 34 CFR §300.533(d)(1)(i)	EVAL		Evaluation Review - Evidence that, on the basis of the review of existing evaluation data and input from the parents, the Evaluation Review documented that a reason was given if no additional data were needed to determine whether the student continues to have a disability.	<p>Verify that, on the basis of the review of existing evaluation data and input from the parents, the Evaluation Review documented that a reason was given if no additional data were needed to determine whether the student continues to have a disability.</p> <p><u>Additional Information:</u> Verify that a reason was stated and that the agency notified the parent(s).</p>

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Review Type Evaluation Review 606	EVAL	34 CFR §300.533(d)	Evaluation Review - Evidence that there was a determination that no additional data were needed to determine whether the student continues to have a disability, and the parents were notified about the decision, the reason(s) for the decision and their rights to request an assessment.	Verify that on the basis of the review of existing evaluation data and input from the parents, the Evaluation Review documented that, if no additional data were needed to determine whether their child continues to be a child with a disability, parents were notified about: <ul style="list-style-type: none"> <li>- the decision,</li> <li>- the reason(s) for the decision, and</li> <li>- their rights to request an assessment.</li> </ul> <u>Additional Information:</u> Check for the parental notification.
Review Type File Review 701	MDR	34 CFR §300.523(a)(1)	Manifestation Determination Review - Evidence that parents were notified not later than the date on which the decision to take action is made.	Verify there is documentation that the parent(s) were notified not later than the date on which the decision to take action was made.  <u>Additional Information:</u> It is suggested that all parent contacts be documented and include the method of contact, name of the person making the contact, and date of the contact.
Review Type File Review 702	MDR	34 CFR §300.523(a)(1)	Manifestation Determination Review - Evidence that the parents were provided the procedural safeguards notice (described in 34 CFR §300.504), not later than the date on which the decision to take action is made.	Verify that the parents were provided the procedural safeguards notice not later than the date on which the decision to take action was made.  <u>Additional Information:</u> Review the parent notification to check the date on which the parent(s) indicated the date of receipt of the procedural safeguards.
Review Type File Review 703	MDR	34 CFR §300.523(a)(2)	Manifestation Determination Review - Evidence that, no later than ten (10) school days after the date on which the decision to take action is conducted, a review was held to determine the relationship between the child's disability and the behavior subject to disciplinary action.	Verify that a Manifestation Determination Review was held no later than ten (10) days after the date on which the decision to take action was made by verifying the dates of the parent notification and Manifestation Determination Review.  <u>Additional Information:</u> The 'school day' is defined as any day, including a partial day that students are in attendance at school for instructional purposes. The term 'school day' has the same meaning for all students in school, including students with and without disabilities. [34 CFR §300.9(c)]  A Manifestation Determination Review is triggered with the following student removal patterns: <ul style="list-style-type: none"> <li>- A single removal exceeding ten consecutive school days. [34 CFR §300.519(a)]</li> <li>- A pattern of removals cumulative to more than ten (10) school days in a year. [34 CFR §300.519(b)]</li> </ul>
Review Type File Review 704	MDR	34 CFR §300.523(b)	Manifestation Determination Review - Evidence that the IEP Team and other qualified personnel conducted the Manifestation Determination Review in a meeting.	Examine the signatures on the IEP Team report to verify that the IEP Team and other qualified personnel conducted the Manifestation Determination Review meeting. [34 CFR §300.344(a)]



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Review Type File Review 705	MDR	34 CFR §300.523(c)(1)	Manifestation Determination Review - Evidence that the behavior subject to disciplinary action was considered during the Manifestation Determination Review process.	Examine the Manifestation Determination Review report to verify that there is a narrative description of the behavior subject to the disciplinary action.
Review Type File Review 706a	MDR	34 CFR §300.523(c)(1)(i)	Manifestation Determination Review - Evidence that, in terms of the behavior subject to disciplinary action, evaluation and diagnostic results were considered.	Examine the Manifestation Determination Review report to verify that the IEP Team considered the evaluation and diagnostic results, in terms of the behavior subject to disciplinary action.
Review Type File Review 706b	MDR	34 CFR §300.523(c)(1)(i)	Manifestation Determination Review - Evidence that relevant information supplied by the parents was considered in terms of the behavior subject to disciplinary action.	Examine the manifestation determination review report to verify that the IEP Team considered the results or other relevant information supplied by the parents in terms of the behavior subject to disciplinary action.
Review Type File Review 706c	MDR	34 CFR §300.523(c)(1)(ii)	Manifestation Determination Review - Evidence that, in terms of the behavior subject to disciplinary action, the observations of the student were considered.	Review the Manifestation Determination Review report to verify that the IEP Team considered the observations of the student, in terms of the behavior subject to disciplinary action.
Review Type File Review 706d	MDR	34 CFR §300.523(c)(1)(iii)	Manifestation Determination Review - Evidence that, in terms of the behavior subject to disciplinary action, the student's IEP and placement were considered.	Review the Manifestation Determination Review report to verify that the IEP Team considered the student's IEP and placement in terms of the behavior subject to disciplinary action.
Review Type File Review 707a	MDR	34 CFR §300.523(c)(2)(i)	Manifestation Determination Review - Evidence that there was a determination of the appropriateness of the current IEP and placement in relationship to the behavior subject to discipline.	<p>Verification that there was a determination of the appropriateness of the current IEP and placement in relationship to the behavior subject to discipline, in carrying out a Manifestation Determination Review.</p> <p><u>Additional Information:</u>            If the determination of the IEP Team is "no" to any of the standards 707a to 707e:            - the behavior must be considered a manifestation of the student's disability, and            - it is not necessary to address the remaining standards 707a to 707e to determine that the behavior was a manifestation of the disability.</p>

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Review Type File Review 707b	MDR	34 CFR §300.523(c)(2)(i)	Manifestation Determination Review - Evidence that there was a determination of the appropriateness of the special education services, supplementary aids and services in relationship to the behavior subject to discipline were provided consistent with the student's IEP and placement.	<p>Verification that the IEP Team determined the appropriateness of the special education services supplementary aids and services were provided consistent with the student's IEP and placement in relationship to the behavior subject to discipline in carrying out a Manifestation Determination Review.</p> <p><u>Additional Information:</u>            If the determination of the IEP Team is "no" to any of the standards 707a to 707e:            - the behavior must be considered a manifestation of the student's disability, and            - it is not necessary to address the remaining standards 707a to 707e to determine that the behavior was a manifestation of the disability.</p>
Review Type File Review 707c	MDR	34 CFR §300.523(c)(2)(i)	Manifestation Determination Review - Evidence that there was a determination of the appropriateness of the behavior intervention strategies in relationship to the behavior subject to discipline were provided consistent with the student's IEP and placement.	<p>Verification that the IEP Team determined the appropriateness of the behavior intervention strategies that were provided consistent with the student's IEP and placement, in relationship to the behavior subject to discipline in carrying out a Manifestation Determination Review.</p> <p><u>Additional Information:</u>            If the determination of the IEP Team is "no" to any of the standards 707a to 707e:            - the behavior must be considered a manifestation of the student's disability, and            - it is not necessary to address the remaining standards 707a to 707e to determine that the behavior was a manifestation of the disability.</p>
Review Type File Review 707d	MDR	34 CFR §300.523(c)(2)(ii)	Manifestation Determination Review - Evidence that there was a determination of the ability of the student to understand the impact and consequences of the behavior subject to disciplinary action in relationship to the student's disability.	<p>Verification that there was a determination of the ability of the student to understand the impact and consequences of the behavior subject to the disciplinary action in relationship to the student's disability, in carrying out a Manifestation Determination Review.</p> <p><u>Additional Information:</u>            If the determination of the IEP Team is "no" to any of the standards 707a to 707e:            - the behavior must be considered a manifestation of the student's disability, and            - it is not necessary to address the remaining standards 707a to 707e to determine that the behavior was a manifestation of the disability.</p>

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Review Type File Review 707e 34 CFR §300.523(c)(2)(iii)	MDR		Manifestation Determination Review - Evidence that there was a determination of the ability of the student to control the behavior subject to the disciplinary action in relationship to the students' disability.	<p>Verification that there was a determination of the ability of the student to control the behavior subject to disciplinary action in relationship to the students' disability, in carrying out a Manifestation Determination Review</p> <p><u>Additional Information:</u>            If the determination of the IEP Team is "no" to any of the standards 707a to 707e:            - the behavior must be considered a manifestation of the student's disability, and            - it is not necessary to address the remaining standards 707a to 707e to determine that the behavior was a manifestation of the disability.</p>
Review Type File Review 708 34 CFR §300.525(a)(1)	MDR		Manifestation Determination Review - Evidence that parents were provided an opportunity to indicate disagreement (agreement) with the Manifestation Determination.	Review the Manifestation Determination Review report to verify that parents were provided an opportunity to indicate disagreement (agreement) with the Manifestation Determination.
Review Type File Review 709 34 CFR §300.525(a)(1)	MDR		Manifestation Determination Review - Evidence that parents were provided an opportunity to request an expedited hearing.	Review the Manifestation Determination Review report to verify that parents were provided an opportunity to request an expedited hearing.
Review Type File Review 710 34 CFR §300.523(d)	MDR		Manifestation Determination Review - Evidence that it was determined whether the behavior subject to disciplinary action was, or was not, a manifestation of the disability.	Verify that a decision was made as to whether the behavior subject to disciplinary action was, or was not, a manifestation of the disability.
Review Type File Review 800 34 CFR §300.522(a)	INT PL		Interim Alternative Educational Placement - Evidence that the alternative educational setting is determined by the IEP Team for the student suspended for possession of drugs or weapons.	Review the Manifestation Determination Review report or the Interim Alternative Placement form to verify that the alternative educational setting was determined by the IEP Team for the student suspended for possession of drugs or weapons.
Review Type File Review 801 34 CFR §300.522(b)(1)	INT PL		Interim Alternative Educational Placement - Evidence that the Interim Alternative Educational setting is selected to enable the student to continue to participate in the general curriculum, although in another setting, in carrying out an Interim Alternative Educational Placement for the student suspended for possession of drugs or weapons.	In carrying out an Interim Alternative Educational Placement for the student suspended for possession of drugs or weapons, review the Manifestation Determination Review report or the Interim Alternative Placement form to verify that the IEP Team selected the alternative educational setting to enable the student to continue to participate in the general curriculum for the student suspended for possession of drugs or weapons.

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Review Type File Review 802	INT PL	34 CFR §300.522(b)(1)	Interim Alternative Educational Placement - Evidence that the Interim Alternative Educational setting is selected to enable the student to continue to receive services and modifications described in the current IEP Team report that will enable the student to meet the goals set out in that IEP, in carrying out an Interim Alternative Educational Placement for the student suspended for possession of drugs or weapons.	In carrying out an Interim Alternative Educational Placement for the student suspended for possession of drugs or weapons, review the Manifestation Determination Review report or the Interim Alternative Placement form to verify that the IEP Team selected an Interim Alternative Placement which enables the student: <ul style="list-style-type: none"> <li>- to continue to receive services and modifications described in the current IEP Team report, and</li> <li>- to meet the goals set out in that IEP.</li> </ul>
Review Type File Review 803	INT PL	34 CFR §300.522(b)(2)	Interim Alternative Educational Placement - Evidence that the Interim Alternative Educational setting is selected to include services and modifications to address the behavior described and are designed to prevent the behavior from recurring in carrying out an Interim Alternative Educational Placement for the student suspended for possession of drugs or weapons.	In carrying out an Interim Alternative Educational Placement for the student suspended for possession of drugs or weapons, review the Manifestation Determination Review report or the Interim Alternative Placement form to verify that the IEP Team identified an Interim Alternative Educational setting : <ul style="list-style-type: none"> <li>- that includes services and modifications that address the behavior described, and</li> <li>- designed to prevent the behavior from recurring.</li> </ul>
Review Type File Review 804	INT PL	34 CFR §300.525(a)(1)	Interim Alternative Educational Placement - Evidence that parents were afforded the opportunity for disagreement with the placement decision and were able to request an expedited hearing in carrying out an Interim Alternative Educational Placement for the student suspended for possession of drugs or weapons.	In carrying out an Interim Alternative Educational Placement for the student suspended for possession of drugs or weapons, review the Manifestation Determination Review report or the Interim Alternative Educational Placement form to verify that the IEP Team afforded the parents the opportunity for disagreement with the placement decision and the opportunity to request an expedited hearing. <p><u>Additional Information:</u>  Parents need to be notified of any change in placement (Interim Alternative Educational Placement), and must receive procedural safeguards along with such notice.</p> <p>If the parent requests a hearing regarding disciplinary actions for drugs or weapons to challenge the Interim Alternative Educational setting and/or the Manifestation Determination, the student shall remain in the Interim Alternative Educational setting for up to 45 calendar days as assigned.</p>

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Review Type File and Program/Service 901	IFSP		Individualized Family Service Plan - Evidence that there is a description of how the families will be included in the transition plans.	<p>Documentation in the Individualized Family Service Plan (IFSP) that there is a description of how the family will be included in the transition plan.</p> <p>If there is a parent signature on the IFSP that addresses how the family will be included in the child's transition from Part C to Part B, this standard is "In compliance."</p> <p>The IFSP which addresses transition is not considered a periodic review of the IFSP. Therefore, the parent must be a participant per 34 CFR §303.343(a)(1)(i).</p> <p>The two required parent contacts for the IEP do not meet the requirements for this standard.</p> <p>If the provider documents that:</p> <ul style="list-style-type: none"> <li>- there were attempts [at least two (2)] to ensure parental attendance at the IFSP transition meeting (e.g. written notice or documented phone call),</li> <li>- the parent did not attend, or</li> <li>- the transition IFSP was not completed, then this standard must be marked "Not applicable" with the notation: "the parents were appropriately invited and did not attend the transition IFSP."</li> </ul> <p>If the transition IFSP is implemented without the parental signature, then it is not a legal IFSP and all standards related to the IFSP transition process are "Out of compliance."</p> <p>If the student is eligible for Part B (and has a current IEP/IFSP) programs/services, and if there is evidence of the documented contacts, Part B may be implemented without the parental signature(s).</p> <p><u>Additional Information:</u>  The IFSP must specify:</p> <ul style="list-style-type: none"> <li>(a) what services are to be provided,</li> <li>(b) actions that are to be taken by the service coordinator in initiating those services, and</li> <li>(c) what actions will be taken by the parent.</li> </ul> <p>[Note: 4 to Part 34 CFR §303.344 of IDEA]</p>

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Review Type File and Program/Service 902	IFSP	34 CFR §303.148(b)(1)	Individualized Family Service Plan - Evidence that there was notification by the local lead agency to the local educational agency that the child will reach the age of eligibility for preschool services (under Part B).	<p>There must be written documentation from the local lead agency to the local educational agency (LEA) that the child will reach the age of eligibility for preschool services.</p> <p>The state educational agency, under <i>Early On</i> /Part C, holds the Intermediate School District (ISD) responsible for the notification.</p> <p>This standard may be considered “In compliance” if (but is not limited to) there is documentation such as:</p> <ul style="list-style-type: none"> <li>- a letter of conveyance that includes a list of eligible students to the LEA, dated prior to the transition IFSP, and/or a transition IFSP signature with a local education agency representative,</li> <li>- an invitation to the LEA to attend the transition IFSP.</li> </ul>
Review Type File and Program/Service 903	IFSP	34 CFR §303.148(b)(2)(i)	Individualized Family Service Plan - Evidence that there is approval of the family of the child who is or may be eligible for preschool services under Part B, to convene a conference.	<p>There must be documentation that the parent consented to the convening of a conference.</p> <p>The consent must be obtained prior to the meeting.</p> <p>This standard may be considered “In compliance” if (but is not limited to) there is verification of:</p> <ul style="list-style-type: none"> <li>- a reference to the requirements of this standard in a previous IFSP,</li> <li>- a written authorization signed by the parent (not applicable if it is the first IFSP/IEP meeting, may not proceed without parent’s presence).</li> </ul> <p>Note: If the meeting is the child’s first IFSP/IEP and also the transition IFSP, a parent signature must be verified for this standard to be “In compliance.”</p>
Review Type File and Program/Service 904	IFSP	34 CFR §303.148(b)(2)(i)	Individualized Family Service Plan - Evidence that there was a conference convened among the: <ul style="list-style-type: none"> <li>a) local lead agency,</li> <li>b) local education agency, and</li> <li>c) the family of the child eligible for preschool services under Part B.</li> </ul>	Evidence of signatures on the transition IFSP of representatives from the local lead agency, the local education agency, and the parent(s).
Review Type File and Program/Service 905	IFSP	34 CFR §303.148(b)(2)(i) 34 CFR §300.132(b)	Individualized Family Service Plan - Evidence that the conference referenced in Standard #904 was held at least ninety (90) calendar days, but not prior to six (6) months before the child was eligible for the preschool services under Part B.	<p>Verify by the date of the transition IFSP and the birth date of the child.</p> <p>Note that “Days” are defined as “Calendar days.” 34 CFR §303.9</p> <p>(This standard is “Not applicable” if the initial IFSP/IEP meeting is held less than 90 days prior to the child’s third birthday.)</p>

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Review Type File and Program/Service 906	IFSP	34 CFR §303.148(b)(2)(i)	Individualized Family Service Plan - Evidence that there was a review of the service/program options that the child, eligible for Part B, may receive.	Verify that service/program options are documented on the transition IFSP.  Document that a minimum of two options are considered.
Review Type File and Program/Service 907	IFSP	34 CFR §303.344(h)(2)(i)	Individualized Family Service Plan - Evidence that there was a discussion with the parents regarding future placements and other matters related to the child's transition.	There must be documentation that each of the elements referenced below were discussed at the transition IFSP.  (a) Any services that may be provided, (b) The actions that are to be taken by the service coordinator in initiating those services, and (c) What actions will be taken by the parents. (Note: 4 Regulations to Part 34 CFR §303.344 of IDEA.)
Review Type File and Program/Service 908	IFSP	34 CFR §303.344(h)(2)(i)	Individualized Family Service Plan - Evidence that there was training for the parents regarding future placements and other matters related to the child's transition.	Documentation that parent training occurred as specified by the transition IFSP.  This standard may be considered "In compliance" if (but not limited to) there is documentation such as: - agenda/announcement of parent training which must include the signature of the service provider/other specified individual and the date conveyed to the parent, - provider service logs of individualized parent training(s).
Review Type File and Program/Service 909	IFSP	34 CFR §303.344(h)(2)(ii)	Individualized Family Service Plan - Evidence that there was a plan to prepare the child for changes in service delivery that included steps to help the child adjust to, and function in, a new setting.	The transition IFSP specifies the steps to help the child adjust to, and function in, a new setting.
Review Type File and Program/Service 910	IFSP	34 CFR §303.344(h)(2)(iii)	Individualized Family Service Plan - Evidence that there was parental consent prior to forwarding information to the local educational agency.	There must be documentation that the LEA has been included in the "Authorization to Release Information" form and verify that there was a parent signature.  The authorization must not exceed a six (6) month time period.  If there are documented attempts to obtain parental authorization without success and if the records are not sent, then the standard is specified as "Not applicable."  If the records are sent without parental authorization, this standard is "Out of compliance."  If the parent refused consent, this standard is "Not applicable."

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Review Type File and Program/Service 911	IFSP	34 CFR §303.148(2)(i)	Individualized Family Service Plan - Evidence that the evaluation/assessment information (required in 34 CFR § 303.322) and copies of the IFSP (developed and implemented in accordance with 34 CFR § 303.340 through 34 CFR § 303.346) were transmitted to the local educational agency.	<p>Documentation that the evaluation/assessment information and copies of the IFSP were sent to the local educational agency.</p> <p>There must, at a minimum, be documentation of a dated transmittal form or letter.</p> <p>If there are documented attempts to obtain parental authorization without success, and if the records are not sent, then the standard is specified as “Not applicable.”</p> <p>If the records are sent without parental authorization, this standard is “Out of compliance.”</p> <p>If the parent refused consent, this standard is “Not applicable.”</p>
Review Type File and Program/Service 912	IFSP	34 CFR §303.148(b)(3)	Individualized Family Service Plan - Evidence that the child’s program options for the period from the child’s third birthday through the remainder of the school year were considered.	<p>Verify that considered service/program options are documented on the transition IFSP.</p> <p>Document that two or more options were considered.</p>